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Distance Education Course Evaluation

Name: _____

Course Name: _____

Start Date: _____ Completion Date: _____

School: _____ Delivery Method: _____

Instructor: _____

Instructor:

Table with 5 columns (low to high) and 6 rows of instructor-related items for rating.

Content/Materials:

Table with 5 columns (low to high) and 5 rows of content/materials-related items for rating.

Delivery Method:

Table with 5 columns (low to high) and 6 rows of delivery method-related items for rating.

Summary rows for overall rating of the course and instructor.

What suggestions do you have to improve this program? _____

If you feel the use of the technologies was not satisfactory, or could be improved, please explain.

Signed: _____ Date: _____