

Disciple Bible Study Student Feedback Form

Please continue comments on back as needed.

Course Title _____

Location of Course _____

Instructor: _____

Date Course Began _____

Facilities Assessment:

Size of room.....	1	2	3	4	5
Lighting.....	1	2	3	4	5
Ease of hearing.....	1	2	3	4	5
Table space.....	1	2	3	4	5
Chairs.....	1	2	3	4	5
Overall location....	1	2	3	4	5

1 being poor – 5 being excellent **Comments:**

General:

1. What was the most helpful aspect of this course?

2. What was the least helpful aspect of this course?

Leader Assessment

Preparation.....	1	2	3	4	5
Eye contact with class.....	1	2	3	4	5
Understanding of students needs, goals, knowledge.....	1	2	3	4	5
Use of examples, stories.....	1	2	3	4	5
Use of facts, statistics.....	1	2	3	4	5
Use of humor.....	1	2	3	4	5
Use of audiovisuals.....	1	2	3	4	5
Use of inclusive language.....	1	2	3	4	5
Use of information given by students during discussion.....	1	2	3	4	5
Response to student questions....	1	2	3	4	5
Suggestions for course application.	1	2	3	4	5

1 being poor – 5 being excellent **Comments:**

3. How could publicity about BOM Provisional Retreats and training be more effective?

4. What did you expect from this course?

5. What should we do differently next time to make the course more helpful and effective?

Course Content Assessment

Usefulness.....	1	2	3	4	5
Clarity of presentation.....	1	2	3	4	5
Sufficient detail.....	1	2	3	4	5
Parts clearly linked to one another.....	1	2	3	4	5
Sufficient time for presentations	1	2	3	4	5
Sufficient time for small groups....	1	2	3	4	5

1 being poor – 5 being excellent **Comments:**

Name of Participant (requested but optional):

Date: _____