APPENDIX C-5h: STUDENT EVALUATION FORM FOR INSTRUCTIONAL FACULTY



□ Modesto Junior College

□ Columbia College

YCCD Faculty Evaluation Student Evaluation for Instructional Faculty

Instructor's name		
Course	Section	Date

This information is confidential and your responses will be anonymous. FILL IN THE ENTIRE CIRCLE FOR THE PHRASE THAT MOST APPROPRIATELY COMPLETES THE SENTENCE or select "Does Not Apply" if you have no information on this item. ERASE MARKS COMPLETELY TO MAKE A CHANGE.

	Strongly	Agree	Disagree	Strongly	Does Not
	Agree			Disagree	Apply
1. The instructor's syllabus clearly explains course	0	0	0	0	0
objectives and grading criteria.					
2. The instructor's presentations are well prepared	0	0	0	0	0
and organized.					
3. The instructor clearly communicates due dates and	0	0	0	0	0
directions for assignments and tests.					
4. The instructor demonstrates a good command of	0	0	0	0	0
the subject matter.					
5. The instructor is enthusiastic about the subject.	0	0	0	0	0
6. The instructor encourages in-class participation.	0	0	0	0	0
7. The instructor answers questions effectively.	0	0	0	0	0
8. The instructor creates a positive learning	0	0	0	0	0
environment.					
9. The instructor is respectful of differing viewpoints.	0	0	0	0	0
10. The instructor encourages creative and/or critical	0	0	0	0	0
thinking.					
11. The instructor's presentations address different	0	0	0	0	0
learning styles.					
12. The instructor utilizes the required course	0	0	0	0	0
materials and/or texts effectively.					
13. The instructor returns exams and assignments in	0	0	0	0	0
a timely manner.					
14. The instructor provides useful feedback on exams	0	0	0	0	0
and assignments.					
15. The instructor's examinations cover course	0	0	0	0	0
objectives and/or skills emphasized in the class.					
16. The instructor usually starts and ends class on	0	0	0	0	0
time.					

17. The instructor is available during office hours.	0	0	0	0	0
18. I would take another class with this instructor.	0	0	0	0	0

If the class has a laboratory component, please respond to items 19 through 23.

15 the class has a taboratory component, prease i					
19. The laboratory experiences contribute to my	0	0	0	0	0
overall understanding of the subject.					
20. The instructor clearly explains or demonstrates	0	0	0	0	0
laboratory techniques, procedures, and equipment.					
21. The instructor's assigned readings and	0	0	0	0	0
exercises contribute to my understanding and					
ability to perform laboratory experiments or					
activities.					
22. The instructor effectively plans and organizes	0	0	0	0	0
laboratory activities.					
23. The instructor clearly explains, models, and	0	0	0	0	0
enforces safety procedures and protocols in the					
laboratory.					

COMMENTS SECTION – *Please print neatly in the space provided.*

1.	What do you believe yo	ur instructoi	r has done especially	well in conduct	ting this
	course?				

2. What might the instructor do to enhance your learning experience?

3. Is there anything else you would like to add?

APPENDIX C-5i: STUDENT EVALUATION FORM FOR COUNSELING FACULTY



□ Modesto Junior College

□ Columbia College

YCCD Faculty Evaluation Student Evaluation for Counseling Faculty

Counselor's name	Semester of evaluation
Please return this survey in the enclosed self-addressed,	stamped envelope, by

This information is confidential and your responses will be anonymous. Please reflect on your counseling session(s) with the counselor named above then complete the form below.

FILL IN THE ENTIRE CIRCLE FOR THE PHRASE THAT MOST APPROPRIATELY COMPLETES THE SENTENCE or select "Does Not Apply" if you have no information on this item. ERASE MARKS COMPLETELY TO MAKE A CHANGE.

	Drop-in session	Scheduled. Appointment	Both
1. What type of counseling visit(s) did you have with this counselor?	0	0	0

	Strongly	A groo	Disagraa	Strongly	Does Not
	Strongly	Agree	Disagree	.	
	Agree			Disagree	Apply
2. The counselor showed genuine interest and	0	0	0	0	0
concern.					
3. The counselor listened carefully to what I had to	0	0	0	0	0
say.					
4. The counselor respected me, my opinion, and my	0	0	0	0	0
circumstances.					
5. The counselor was enthusiastic about assisting me.	0	0	0	0	0
6. The counselor remained focused on me and my	0	0	0	0	0
concerns, circumstances, and issues throughout the					
counseling session.					
7. The counselor was enthusiastic about programs	0	0	0	0	0
and services at the college.					
8. The counselor communicated effectively with me.	0	0	0	0	0
9. The counselor was knowledgeable about specific	0	0	0	0	0
services, programs, or procedures that I asked about.					
10. The counselor was knowledgeable about courses	0	0	0	0	0
and programs at four-year colleges and universities.					
11. The counselor was knowledgeable about	0	0	0	0	0
educational and career opportunities and how to plan					
for them.					

12. The counselor was knowledgeable about	0	0	0	0	0
resources and services available in the community.					
	Strongly Agree	Agree	Disagree	Strongly Disagree	Does Not Apply
13. The counselor helped me achieve a realistic	0	0	0	0	0
understanding of the options available to me.					
14. The counselor provided me with written and/or	0	0	0	0	0
online resources to help me research my options					
15. As a result of my meeting with the counselor, I	0	0	0	0	0
am more confident in my decisions.					
16. I am satisfied with the Educational Plan	0	0	0	0	0
document that was developed with my counselor					
during my session.					
17. I felt comfortable sharing my concerns with this	0	0	0	0	0
counselor.					
18. If needed, I would welcome another session with	0	0	0	0	0
this counselor.					

	COMMENTS	SECTION -	Please	print neatl	ly in	the s	pace	provide	ed.
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1. What do you believe your counselor did especially well in working with	1.	What do vo	ou believe vour	counselor did	especially	well in	working v	with v	νου	12
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2. What might the counselor have done to enhance your counseling session?

3. Is there anything else you would like to add?

APPENDIX C-5j: STUDENT EVALUATION FORM FOR LIBRARY FACULTY



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□ Columbia College

YCCD Faculty Evaluation Student Evaluation for Library Faculty

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	Librarian's name	Date

This information is confidential and your responses will be anonymous. Please reflect on your interaction with the librarian named above then complete the form below.

FILL IN THE ENTIRE CIRCLE FOR THE PHRASE THAT MOST APPROPRIATELY COMPLETES THE SENTENCE or select "Does Not Apply" if you have no information on this item. ERASE MARKS COMPLETELY TO MAKE A CHANGE.

	Strongly Agree	Agree	Disagree	Strongly Disagree	Does Not Apply
1. I was comfortable approaching this librarian for help.	0	0	0	0	0
2. The librarian answered my questions effectively.	0	0	0	0	0
3. The librarian presented information in a way I could understand.	0	0	0	0	0
4. The librarian was knowledgeable about appropriate resources for satisfying my information needs.	0	0	0	0	0
5. The librarian was enthusiastic about the library's services and resources.	0	0	0	0	0
6. As a result of my interaction with this librarian, I am more comfortable using the library's services and resources.	0	0	0	0	0
7. The librarian taught me to find what I needed independently.	0	0	0	0	0
8. The librarian remained focused on me and my information needs throughout our interaction.	0	0	0	0	0
9. I was treated respectfully and professionally by this librarian.	0	0	0	0	0
10. I would ask this librarian for help in the future.	0	0	0	0	0

Please respond to the questions on the back of this form.

COMMENTS SECTION – Please print neatly in the space provided.

1.	What do you believe the librarian did especially well in your interaction
2.	What might the librarian have done to enhance your library experience?
3.	Is there anything else you would like to add?

APPENDIX C-5k: STUDENT EVALUATION FORM FOR FACULTY TEACHING ONLINE



□ Modesto Junior College

□ Columbia College

YCCD Faculty Evaluation Student Evaluation for Faculty Teaching Online

Instructor's name		
Course	Section	Date

This information is confidential and your responses will be anonymous. MARK THE CIRCLE FOR THE PHRASE THAT MOST APPROPRIATELY COMPLETES THE SENTENCE or select "Not Applicable" if you have no information on this item.

	Strongly Agree	Agree	Disagree	Strongly Disagree	Not Applicable
1. The instructor's syllabus explains	0	0	0	0	0
course objectives and grading criteria.					
2. The instructor's presentation of the	0	0	0	0	0
course material is clear and well-					
organized.					
3. The instructor clearly communicates	0	0	0	0	0
due dates and directions for assignments					
and tests.					
4. The instructor demonstrates a good	0	0	0	0	0
command of the subject matter.					
5. The instructor is enthusiastic about	0	0	0	0	0
the subject.					
6. The instructor creates a sense of	0	0	0	0	0
community in the online course.					
7. The instructor encourages active	0	0	0	0	0
participation in the online community					
8. The instructor answers questions	0	0	0	0	0
effectively and in a timely manner.					
9. The instructor is respectful of	0	0	0	0	0
differing viewpoints.					
10. The instructor encourages creative	0	0	0	0	0
and/or critical thinking.					
11. The instructor's presentations	0	0	0	0	0
address different learning styles.					
12. The instructor utilizes the required	0	0	0	0	0
course materials and/or texts effectively.					

13. The instructor returns exams and assignments in a timely manner.	0	0	0	0	0
	Strongly Agree	Agree	Disagree	Strongly Disagree	Not Applicable
14. The instructor provides useful feedback on exams and assignments.	0	0	0	0	0
15. The instructor creates challenging online assignments.	0	0	0	0	0
16. The instructor's examinations cover information and/or skills emphasized within the online course.	0	0	0	0	0
17. The instructor allows adequate time to complete online exams.	0	0	0	0	0
18. The instructor's directions and questions for online examinations are phrased clearly.	0	0	0	0	0
19. The online instructor provides multiple options for effective student-faculty contact.	0	0	0	0	0
20. I would take another online course from this instructor.	0	0	0	0	0

If the class has a laboratory component, please respond to items 21 through 25.

21. The laboratory experiences contribute to my	0	0	0	0	0
overall understanding of the subject.					
22. The instructor clearly explains or demonstrates	0	0	0	0	0
laboratory techniques, procedures, and equipment.					
23. The instructor's assigned readings and	0	0	0	0	0
exercises contribute to my understanding and					
ability to perform laboratory experiments or					
activities.					
24. The instructor effectively plans and organizes	0	0	0	0	0
laboratory activities.					
25. The instructor clearly explains, models, and	0	0	0	0	0
enforces safety procedures and protocols in the					
laboratory.					

COMMENTS SECTION

1. What do you believe your instructor has done especially well in conducting this course?

2.	What might the instructor do to enhance the course?
3.	Is there anything else you would like to add?

APPENDIX C-51: STUDENT EVALUATION FORM FOR HEALTH SERVICES COORDINATOR/COLLEGE NURSE



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□ Columbia College

YCCD Faculty Evaluation

Student Evaluation for Health Services Coordinator/Faculty Member

Student Evaluation for Health Services Coo	ramator, racarty without
Coordinator/Faculty name	Date

This information is confidential and your responses will be anonymous. Please reflect on your interaction with the Coordinator/Faculty Member named above then complete the form below.

FILL IN THE ENTIRE CIRCLE FOR THE PHRASE THAT MOST APPROPRIATELY COMPLETES THE SENTENCE or select "Does Not Apply" if you have no information on this item. ERASE MARKS COMPLETELY TO MAKE A CHANGE.

	Strongly	Agree	Disagree	Strongly	Does
	Agree	rigice	Disagree	Disagree	Not
	Agree			Disagree	Apply
1. I was comfortable approaching this nurse for	0	0	0	0	Apply
help.					O
2. The nurse answered my questions effectively.	0	0	0	0	0
3. The nurse presented information in a way I	0	0	0	0	0
could understand.					
4. The nurse was knowledgeable about appropriate	0	0	0	0	0
resources for satisfying my information needs.					
5. The nurse was enthusiastic about Health	0	0	0	0	0
Services and resources in the office.					
6. As a result of my interaction with this nurse, I	0	0	0	0	0
am more comfortable using Health Services					
resources.					
7. The nurse taught me to find what I needed	0	0	0	0	0
independently.					
8. The nurse remained focused on me and my	0	0	0	0	0
information needs throughout our interaction.					
9. I was treated respectfully and professionally by	0	0	0	0	0
this nurse.					
10. I would ask this nurse for help in the future.	0	0	0	0	0
•					
11. The nurse cared for my illness/injury in a	0	0	0	0	0
competent and knowledgeable manner.					

12. The nurse made every attempt to maintain	0	0	0	0	0
confidentiality during my care.					
13. The nurse was knowledgeable about other	0	0	0	0	0
community services I may need.					
14. The nurse was knowledgeable about the over	0	0	0	0	0
the counter products offered in the health services					
office.					

Please respond to the questions on the back of this form.

COMMENITE SECTION	D1		. :	41		
COMMENTS SECTION	– Piease	prini neaii	un	ine s	pace	proviaea.

2. What might the nurse have done to enhance your Health Services experience?

3. Is there anything else you would like to add?