

Math Department Mid-Semester Evaluation Form

Student Evaluation

Student Name: _____

Advisor: _____

Most Recent Grade _____

Are you satisfied with your current grade in the class?

Is the class challenging? What do you find to be the most difficult aspect of this class? What is the easiest?

What do you like about the course?

Talk about your overall effort and class presence. How would you rate it? Do you contribute positively?

What would you like me to change for the next quarter? What would you like me to keep on doing?

What would you like to change for the next quarter so that you can do better? What are your goals?

Teacher Comments: