## xxx Learning and Development Support COURSE EVALUATION FORM

Name: Dept:						
Course Title:			Course Leader:			
Start Date: End Date: _		te: l	e: Location:			
Please rate the following (write any notes in the final box):						
		Way Beneath Expectation	Did not quite meet expectation	Met Expectation	Exceeded Expectation	
COURSE MATERIALS:						
- Clear and easy to follow:						
- Relevant to course objectives:						
- Use them later for reference						
COURSE LEADER:						
- Knowledge of materials						
- Overall presentation						
- Time for discussion/practice						
COURSE LOCATION:						
- Conducive to learning						
What aspects of the course did you find the most useful?						
How might the course be improved?						
Overall course comment:						

Please return this form to the Course Leader or directly to the Learning and Development Support Department (ext. 276).