RUNNING START

A Collaboration between the Community College System
of New Hampshire and Secondary Education Institutions

<u>COURSE EVALUATION FORM D</u> (completed by high school students)

We take seriously your views of Running Start. By completing this evaluation, you are helping us to improve the program. This evaluation will be shared with your teacher at the conclusion of the course. Do not sign your name.

High School _____ Teacher _____

Course Name _____ WMCC # _____

	Poor	Below Average	Average	Above Average	Superior
Clearly outlines the course objective and grading policies at the beginning of the course.	_____	_____	_____	_____	_____
Provides instructional material that helped me.	_____	_____	_____	_____	_____
Is well prepared for each class.	_____	_____	_____	_____	_____
Shows a knowledge of the subject matter.	_____	_____	_____	_____	_____
Shows enthusiasm for teaching the course.	_____	_____	_____	_____	_____
Communicates clearly.	_____	_____	_____	_____	_____
Uses class time well.	_____	_____	_____	_____	_____
Gives enough tests, assignments, etc. to judge my performance accurately.	_____	_____	_____	_____	_____
Grades fairly.	_____	_____	_____	_____	_____
Returns tests, papers, etc. in a reasonable time frame.	_____	_____	_____	_____	_____
Covers the material at a reasonable pace.	_____	_____	_____	_____	_____
Establishes a reasonable workload.	_____	_____	_____	_____	_____
Encourages class discussion and participation.	_____	_____	_____	_____	_____
Stimulates thinking.	_____	_____	_____	_____	_____
Is available to students outside of class.	_____	_____	_____	_____	_____
Shows respect and concern for students.	_____	_____	_____	_____	_____

Given the opportunity, I would _____ would not _____ take another Running Start course.

What worked well in this class? _____

_____

What would you change about this class? _____

_____

What would you tell other students who are considering taking a Running Start class? _____

_____

PLEASE USE THE BACK FOR ADDITIONAL COMMENTS YOU WOULD LIKE TO MAKE.