

## Mott Community College Experiential Learning Student Evaluation Form

Course \_\_\_\_\_

Service Site Name \_\_\_\_\_

What type of experience was it?

Please Circle One.

Internship   
  Externship   
  Job Shadow   
  Service-Learning   
  Event

	Excellent	Good	Fair	Poor	N/A
Please rate your personal enjoyment of the project					
Rate how well prepared you were for the service project					
How prepared/organized was your service site					
How prepared/organized was the professor					
How helpful was the Office of Professional Development and Experiential Learning					

Did the service project help you understand your class work? Why or why not?

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Did you find the service you provided to be meaningful? Why or why not?

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What advice would you give future students doing this project?

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What improvements could the instructor make to better prepare future students to serve?

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*Thank you for your time and participation!*