Survey Questionnaire Form for Students

**Student Details**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Student ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Course: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Academic Experience**

* **How would you rate the quality of your course lectures?**
  + **Excellent □**
  + **Good □**
  + **Fair □**
  + **Poor □**
* **Rate your level of engagement in the following class activities:**

| **Activity** | **Very Engaged** | **Somewhat Engaged** | **Not Engaged** |
| --- | --- | --- | --- |
| **Lectures** | **□** | **□** | **□** |
| **Group Discussions** | **□** | **□** | **□** |
| **Assignments** | **□** | **□** | **□** |
| **Labs** | **□** | **□** | **□** |

* **What resources do you find most helpful for your studies?**
* **Suggestions for improvement:**

**General Feedback**

**Please share any other feedback that could help us improve your learning experience.**

**Confirmation**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**