

Blue Springs School District
Community Education
Course Evaluation

Date: _____ Instructor: _____

Course Title: _____



It is extremely important to our program to get your comments, compliments and suggestions. If you prefer, you can complete this course evaluation form online at www.bluespringsschools.net, community education. Your completed form will be sent by email directly to me at the Community Ed office.

1. In general, the class was what I expected it to be. Yes No

2. I enjoyed the class? Yes No Why? _____

3. The instructor was knowledgeable of the subject matter? Yes No

4. From 1 - 10 (with 10 being the highest rating), I would give the *instructor* a _____

5. The price was reasonable? Yes No

6. Registration procedures were convenient and friendly? Yes No

If not, please give your suggestions: _____

7. From 1 - 10 (with 10 being the highest rating), I would give the *office staff* a _____

8. The facility was suitable for the class? Yes No If not, why? _____

9. Please give suggestions for future classes. _____

10. If you would be interested in teaching a class, please give us your name, daytime phone number and subject. _____

How did you learn about our program?

- Received catalog in mail Library District's Web Site
 A friend Newspaper Cable news Other _____

Your comments, compliments and suggestions are always welcome.

Please feel free to call me at 224-1364.

We know you have a choice. Thank you for choosing Blue Springs Community Ed!

Debbi Lawrence, Program Administrator