



# Class Evaluation Form

CLASS LOCATION \_\_\_\_\_ CLASS NAME \_\_\_\_\_

INSTRUCTOR(S) \_\_\_\_\_ DATE \_\_\_\_\_

My overall impression of this class was:	1	2	3	4	5	6	7	8	9	10
	Excellent								Poor	
The class was:	1	2	3	4	5	6	7	8	9	10
	Easy								Difficult	
The amount of material presented was:	1	2	3	4	5	6	7	8	9	10
	Too little								Too much	
Class materials were clear and easy to use.	1	2	3	4	5	6	7	8	9	10
	Easy								Difficult	
Class content was logically organized.	1	2	3	4	5	6	7	8	9	10
	Agree								Disagree	
Class length was:	1	2	3	4	5	6	7	8	9	10
	Too short								Too long	
The class met my expectations.	1	2	3	4	5	6	7	8	9	10
	Agree								Disagree	
Questions were encouraged by the instructor.	1	2	3	4	5	6	7	8	9	10
	Agree								Disagree	
Instructor's presentation was clear & understandable.	1	2	3	4	5	6	7	8	9	10
	Agree								Disagree	
Physical arrangements were satisfactory (room arrangement, display equipment, etc):	1	2	3	4	5	6	7	8	9	10
	Agree								Disagree	

Additional things I would like to learn in OhioGROWs classes.

Comments: