

FEEDBACK FORM

Teacher 's Name _____

Please answer as honestly as you can.

We want you to comment on those things which have been *important to you*, but to prompt your thoughts, here are some ideas.

- | | |
|---|--|
| <input type="checkbox"/> classrooms | <input type="checkbox"/> hours |
| <input type="checkbox"/> administration | <input type="checkbox"/> equipment |
| <input type="checkbox"/> materials | <input type="checkbox"/> learners |
| <input type="checkbox"/> secretarial support | <input type="checkbox"/> course formats |
| <input type="checkbox"/> management | <input type="checkbox"/> course levels |
| <input type="checkbox"/> your 1 st few weeks | <input type="checkbox"/> Quality Assurance process |

Bulleted notes are fine rather than an essay!

The things that I think work well:

The things that I think need to be need to be reviewed and revised: