

# Royal Outlands Interkingdom University Teaching Evaluation Form

(Use of the Teaching Evaluation Form is purely voluntary for the benefit of the teachers.)

Teacher's Name:

(SCA) \_\_\_\_\_

Date: \_\_\_\_\_

Sponsoring Event and Location : \_\_\_\_\_

Class Title: \_\_\_\_\_

Would you be willing to discuss your thoughts with the teacher? \_\_\_\_\_ Yes \_\_\_\_\_ No

If so, please include your name and contact information:

\_\_\_\_\_  
\_\_\_\_\_

What worked well in this class?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What did not work so well in this class?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What suggestions, if any, would you offer to improve this class?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_