

**Minnesota West Community & Technical College
Clinical Faculty Evaluation**

Circle the number, which most accurately reflects the observer's opinion for each of the following statements.

- 5 strongly agree
- 4 agree
- 3 both agree and disagree
- 2 disagree
- 1 strongly disagree
- 0 not observed

- | | |
|---|-------------|
| 1. Clinical experience reflected clinical objectives. | 5 4 3 2 1 0 |
| 2. Information was presented clearly. | 5 4 3 2 1 0 |
| 3. Instructional technique was appropriate to the situation. | 5 4 3 2 1 0 |
| 4. Encouraged relevant student participation. | 5 4 3 2 1 0 |
| 5. Clinical time used effectively. | 5 4 3 2 1 0 |
| 6. Demonstrated enthusiasm for the subject. | 5 4 3 2 1 0 |
| 7. Explained important ideas clearly and at a student's level of understanding. | 5 4 3 2 1 0 |
| 8. Demonstrates clinical competence and knowledge. | 5 4 3 2 1 0 |
| 9. Communicated effectively. | 5 4 3 2 1 0 |
| 10. Encouraged critical thinking and analysis. | 5 4 3 2 1 0 |
| 11. Created an environment, which was conducive to learning. | 5 4 3 2 1 0 |
| 12. Responded appropriately to student's questions and concerns. | 5 4 3 2 1 0 |
| 13. Clinical evaluations and assignments returned in a timely manner. | 5 4 3 2 1 0 |

Comments and suggestions:

Overall rating of teacher performance on day observed is:

Satisfactory _____ Unsatisfactory _____

Observer's Signature _____ Date _____

Clinical faculty signature _____ Date _____

Clinical faculty comments (optional)