

**Minnesota West Community & Technical College  
Student Course Evaluation for EMS**

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

Location/Date: \_\_\_\_\_

Instructor: \_\_\_\_\_

	<b>Poor</b>					<b>Excellent</b>
	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>

**Please Circle**

<b>1</b>	<b>Course Content</b>	X	X	X	X	X	X
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	<b>Course Materials (handouts, etc.)</b>	X	X	X	X	X	X
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	<b>Instructor as a learning facilitator</b>	X	X	X	X	X	X
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**2. Were course objectives followed & met?**    \_\_\_\_\_ Yes                    \_\_\_\_\_ No

**3. How was balance between lecture/discussion/demonstration/participation**

**4. What part was most helpful**

**What part was least helpful**

**5. Suggestions you have to improve course or presentation**

**7. Would you recommend this course to others**    \_\_\_\_\_ Yes                    \_\_\_\_\_ No

**8. Comments....**

**Thank you for your cooperation**