Minnesota West Community & Technical College
Student Course Evaluation for EMS

Class Title:______________________________________________________________

Location/Date:___________________________________________________________

Instructor:_______________________________________________________________

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<tr>
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<th>5</th>
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Please Circle

1. Course Content
   Course Materials (handouts, etc.) X X X X X X
   Instructor as a learning facilitator X X X X X X

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

Reviewed 3/20/2012