

**IMPORTANT! THIS FORM WILL NOT SCAN IF PHOTOCOPIED!  
DO NOT XEROX, COPY OR DUPLICATE THIS FORM IN ANY WAY.**

PLEASE USE NO. 2 PENCILS

RIGHT ● ● ●	WRONG ✓ ⊖ ⊗ ⊙
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**Maxine Goodman Levin  
College of Urban Affairs  
Cleveland State University**

Student Evaluation of Instruction

The evaluation of teaching will provide useful information to the course instructor. Please give your responses careful and serious consideration. Mark only one alternative for each question that best reflects your situation or feeling. Erase changes completely. Thank you for your assistance.

Strongly Agree SA	Agree A	Neutral N	Disagree D	Strongly Disagree SD	Not Applicable NA				
<b>ABOUT THE COURSE</b>									
				SA	A	N	D	SD	NA
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>ABOUT THE INSTRUCTOR</b>									
				SA	A	N	D	SD	NA
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**ABOUT YOU**

16. I am:     a degree-seeking student     non-degree (skip Q17 & 18)

17. I am enrolled as:     Freshman     Sophomore     Junior  
                                    Senior     Masters     Ph.D.     Other

18. I am in the College of:     Arts & Sciences     Business     Education     Engineering  
                                    First College     Law     Urban Affairs     Undeclared     Other

19. Anticipated letter grade:     A(A+,-)     B(B+,-)     C     D     F     I     Don't know

20. This course is:     in my major     not in my major     I am non-degree

21. This course is:     required for my major or other goals  
                                    not required for my major or other goals

22. This course is:     primarily lecture     seminar     lab  
                                    performance/practice     other

23. Prior to enrolling, I expected this course to be of:  
                                   little or no value to me ① ② ③ ④ ⑤ great value to me

24. When I enrolled, I wanted to take this course:  
                                   very little ① ② ③ ④ ⑤ very much

CP25-0514 (C3.F3) Printed in the U.S.A.

