



Transforming Our Community...  
One Student at a Time

Cranford Campus  
(908) 709-7600

Elizabeth Campus  
(908) 527-7258

### Senior Scholar Program Evaluation Form

|                           |                           |
|---------------------------|---------------------------|
| <b>Course Name:</b> _____ | <b>Course Code:</b> _____ |
| <b>Instructor:</b> _____  | <b>Date:</b> _____        |

Your completion of this evaluation form will help us determine the effectiveness of this course and/or whether it needs to be changed in some way to better satisfy your needs and the needs of future participants.

A. Please circle: **1 = Poor    2 = Below Average    3 = Fair    4 = Good    5 = Excellent**

- |    |   |   |   |   |   |   |
|----|---|---|---|---|---|---|
| 1. | I rate the subject content of this course as:       | 1 | 2 | 3 | 4 | 5 |
| 2. | The course met my expectations:                     | 1 | 2 | 3 | 4 | 5 |
| 3. | The instructor's knowledge of his/her material was: | 1 | 2 | 3 | 4 | 5 |
| 4. | The instructor's organization skills were:          | 1 | 2 | 3 | 4 | 5 |
| 5. | The instructor demonstrated a concern for students: | 1 | 2 | 3 | 4 | 5 |
| 6. | The instructional facilities met my expectations:   | 1 | 2 | 3 | 4 | 5 |
| 7. | Overall, I rate this course as:                     | 1 | 2 | 3 | 4 | 5 |

B. What did you like about this course?

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C. What would you change?

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D. What course would you like to see offered at Union County College?

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E. How did you hear about this course?

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