



Palo Alto Adult School
CLASS EVALUATION

STUDENT NAME

PHONE / EMAIL

DATE

TEACHER'S NAME

CLASS NAME

ROOM NUMBER

Please tell us a little more about your learning experience. Please use the back if you need more space.

1. Did you achieve your goals for taking the class? ___ All ___ Some ___ None

If you achieved all or some of your goals, describe how the class helped you.

If you did not achieve your goals, what were the reasons?

2. What's the most useful thing you learned and why was it useful?
3. How likely will you apply the skills(s) you learned in this class to your everyday life, work, or school?
4. Based on the course description or your previous experience, on a scale of 1-5 where, **1 didn't meet expectations, and 5 met expectations**, how well did the class meet your expectations? Please circle:

1 2 3 4 5

5. How helpful was the instruction and guidance you received related to the objectives of the class?
___ Very helpful ___ Somewhat helpful ___ Not helpful

Comments:

6. Consider your overall experience as a student at the PAAS, do you have suggestions for improvement?
7. How did you hear about this class?
8. What other PAAS classes have you taken in the last 3 years?
9. On a scale of 1-5 where, **1 is not at all likely, and 5 is extremely likely**, how likely are you to refer PAAS to a friend or colleague? Please circle:

1 2 3 4 5

10. What classes would you like to see PAAS offer in the future?