

Detailed Module Feedback Form

Module Information

Your Name (optional)

Email (optional)

Module Name

Instructor's Name

Feedback

1. How would you rate the module overall?

- ☐ 1
☐ 2
☐ 3
☐ 4
☐ 5

2. How would you rate the quality and clarity of the module content?

3. How effective was the teaching/instruction?

4. How would you rate the quality of learning materials and resources?

5. Was the pace of the module appropriate?

6. Were the assessments/exams fair and clearly explained?

Comments & Suggestions

7. What did you like most about the module?

8. What could be improved?

Your answer

9. Any other feedback or comments?

Your answer