

Instructor Teaching Performance Review Form

Instructor & Course Information

Instructor Name**Course Title****Semester****Reviewer Name**

Performance Criteria

1 = Poor, 2 = Fair, 3 = Good, 4 = Very Good, 5 = Excellent

Knowledge of Subject

Clarity and Organization

Communication Skills

Encourages Participation

Timely Feedback

Comments & Suggestions

Strengths**Areas for Improvement****Additional Comments**