

Classroom Feedback Collection Form

Your Name

Email Address

Class/Course

How would you rate this class?

- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5

What did you like about the class?

What can be improved?

Would you recommend this class to others?

- ☐ Yes
- ☐ No

Other Suggestions or Comments