

COURSE EVALUATION QUESTIONNAIRE

Oklahoma State University Fire Service
Training
1723 W. Tyler Stillwater, OK 74078-8041
Phone: 405-744-5727 or 800-304-5727
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Name of course _____

Location _____

Course Instructor(s) _____

What type of agency are you affiliated with:

Fire EMS Police Industry Other _____

If you selected Fire or EMS (above), are you: Career Volunteer Other _____

Circle the response which best reflects your opinions regarding the following statements using the criteria:

- SA – If you strongly agree with the statement
- A – If you agree with the statement
- D – If you disagree with the statement
- SD – If you strongly disagree with the statement

SA	A	D	SD	The methods used in teaching this class were appropriate.
SA	A	D	SD	It was easy to remain attentive.
SA	A	D	SD	Much was gained by taking this class.
SA	A	D	SD	The instructor encouraged the development of new view points or practical techniques.
SA	A	D	SD	The course material seemed worthwhile.
SA	A	D	SD	The instructor(s) demonstrated thorough knowledge of the subject.
SA	A	D	SD	The material was carefully explained and additional assistance was provided by the instructor(s).
SA	A	D	SD	The class was interesting.
SA	A	D	SD	The class was taught well.
SA	A	D	SD	I would like other appropriate members of my department to attend this class.

Course Content

Please give your comments regarding the course content, subject matter, and any particular use this course has for your department or agency.

Which topic was the most beneficial? Why?

Which topic was the least beneficial? Why?

Instructor(s)

What are your comments regarding the instructor(s) for this course?

General Comments

What was your overall impression of this course?

What improvements would you suggest for this course?