

**CONTINUING EDUCATION  
 DISTANCE EDUCATION CONTENT AND INSTRUCTOR EVALUATION REPORT**

COURSE TITLE: \_\_\_\_\_

CE #: \_\_\_\_\_ HOURS: \_\_\_\_\_ DATE: \_\_\_\_\_

DELIVERY METHOD:    CORRESPONDENCE    INTERNET    OTHER:\_\_\_\_\_

SPONSOR: \_\_\_\_\_

INSTRUCTOR: \_\_\_\_\_

I. <u>INSTRUCTOR:</u>	<u>Excellent</u>	<u>Average</u>	<u>Not Applicable</u>
Demonstrated knowledge of course content	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responded satisfactorily to questions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gave examples to illustrate a point	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Preparation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Availability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

II. <u>CONTENT/MATERIALS:</u>	<u>Excellent</u>	<u>Average</u>	<u>Not Acceptable</u>
Clear course objectives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Organization of materials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Practical value of content	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Value of resource materials*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Content and materials current	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

III. <u>D.E. DELIVERY METHOD:</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ease of use of technology and access to course	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Support services to assist with technology and course access	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How was your experience with this self -paced study	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How was the course structure for self-paced study	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Satisfaction with the technology used	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you asked a content related question, who responded and how quickly? Was your question answered satisfactorily?

For "Not Acceptable" rating(s) state your reasons and/or any other comments regarding the course.

Name (optional) \_\_\_\_\_ Date: \_\_\_\_\_

NOTE: No exceptions to this format without Division's prior approval

\* Any supplemental/additional information such as useful websites, case studies, articles from publications, etc.