

**THE OSHER LIFELONG LEARNING INSTITUTE AT TOWSON UNIVERSITY
COURSE EVALUATION FORM**

Please do NOT fold this form. We must make copies and folded ones get hung in the machine!

Title of Course _____

Instructor _____

Please circle the appropriate number for each item below:

	Unsatisfactory	Satisfactory	Good	Very Good	Excellent
Course Content	1	2	3	4	5
Course Instructor	1	2	3	4	5
Handouts (if applicable)	1	2	3	4	5
Visuals (if applicable)	1	2	3	4	5

Did this course meet the objectives or description as stated in the catalogue? YES NO UNDECIDED

Why or why not? _____

Did this course meet your personal expectations? YES NO UNDECIDED

Why or why not? _____

What would you suggest to improve the course? _____

Other Comments _____

Send completed form to: Osher Institute, Towson University, 8000 York Road, Towson, MD 21252-0001
