



Study Group Evaluation

Your comments on OLLI courses are helpful in planning for future courses. Your answers to the following questions will be appreciated and shared with the instructor, OLLI staff, and the study group committee.

Name of Study Group: _____ **Term & Year:** _____
Instructor/Facilitator: _____

Indicate your level of satisfaction with the following. Please add any comments/suggestions.

1. The focus of the course matched the course description. Comments:	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. The supporting materials were relevant and helpful. Comments:	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. The amount of group participation in the course was: Comments:	Not Nearly Enough	Almost Enough	Just Right	A Little Too Much	Far Too Much	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. The amount of time that the instructor allowed for questions and discussion in each session was: Comments:	Not Nearly Enough	Almost Enough	Just Right	A Little Too Much	Far Too Much	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

5. The setup of the room, including visual aids, was conducive to my learning experience.
 Comments:

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. The instructor was prepared and knowledgeable.
 Comments:

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. I would take another course by this instructor/facilitator.
 Comments:

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. I recommend this course be offered again.
 Comments:

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please share your suggestions for future programming for OLLI. For instance, are there any other courses you'd like to see offered? Is there any instructor you would recommend?

Name (optional; please print) _____



OLLI-UM is a Community Program of the Geriatrics Center