RUNNING START
A Collaboration between the Community College System
of New Hampshire and Secondary Education Institutions

COURSE EVALUATION FORM D (completed by high school students)
We take seriously your views of Running Start. By completing this evaluation, you are helping us
to improve the program. This evaluation will be shared with your teacher at the conclusion of the
course. Do not sign your name.

High School __________________________ Teacher __________________________
Course Name __________________________ WMCC # __________________________

Clearly outlines the course objective and grading
    policies at the beginning of the course. __________ __________ __________ __________ __________
Provides instructional material that helped me. __________ __________ __________ __________ __________
Is well prepared for each class. __________ __________ __________ __________ __________
Shows a knowledge of the subject matter. __________ __________ __________ __________ __________
Shows enthusiasm for teaching the course. __________ __________ __________ __________ __________
Communicates clearly. __________ __________ __________ __________ __________
Uses class time well. __________ __________ __________ __________ __________
Gives enough tests, assignments, etc. to judge
    my performance accurately. __________ __________ __________ __________ __________
Grades fairly. __________ __________ __________ __________ __________
Returns tests, papers, etc. in a reasonable time frame. __________ __________ __________ __________ __________
Covers the material at a reasonable pace. __________ __________ __________ __________ __________
Establishes a reasonable workload. __________ __________ __________ __________ __________
Encourages class discussion and participation. __________ __________ __________ __________ __________
Stimulates thinking. __________ __________ __________ __________ __________
Is available to students outside of class. __________ __________ __________ __________ __________
Shows respect and concern for students. __________ __________ __________ __________ __________
Given the opportunity, I would _____ would not _____ take another Running Start course.

What worked well in this class? __________________________________________________________

What would you change about this class? __________________________________________________

What would you tell other students who are considering taking a Running Start class? __________

PLEASE USE THE BACK FOR ADDITIONAL COMMENTS YOU WOULD LIKE TO MAKE.