Online Course Evaluation Request

Faculty Name: ___________________________     Date: _______________

Course Name: ___________________________     Quarter: _____________

Course Item #/Section: _______________________

Period of evaluation: ____________________________
   (start and end dates for student access to evaluation)

Check all that apply:

☐ Required evaluation (results returned to Dean)

☐ Informal student evaluation (results returned to faculty)

☐ Peer observation   (Name of observer: _______________)

☐ Dean observation   (Name of dean: _______________

Signature: _________________________________________________________

Return this form to Marie Rustemeyer, MS 2150.