

**APPENDIX J3.1**  
**TABULATION OF STUDENT EVALUATIONS FORM**  
**COUNSELING SESSIONS – PART A**  
**Articles 6 and 6A – Evaluation)**  
Foothill-De Anza Community College District

FACULTY NAME: \_\_\_\_\_ QUARTER: \_\_\_\_\_

DEPARTMENT/PROG: \_\_\_\_\_ ACADEMIC YR: \_\_\_\_\_

CAMPUS LOCATION:  Foothill  De Anza  Center (specify) \_\_\_\_\_

FACULTY STATUS: (check one)  Full-time  Part-time

If full-time, (check one)  Tenured  Contract (grant-funded/temporary replacement)  
 Probationary Phase I  Probationary Phase II  Probationary Phase III

If part-time, number of service credits in Division (per Article 7.9) \_\_\_\_\_

DUTIES:  Instructor  Counselor  Librarian  Other (specify) \_\_\_\_\_

COURSE/ACTIVITY: \_\_\_\_\_ DATE OF EVALUATION: \_\_\_\_\_

PREPARED BY: \_\_\_\_\_ CWID \_\_\_\_\_  
*(please print)*

SIGNATURE: \_\_\_\_\_ DATE \_\_\_\_\_

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a=Strongly Agree  
b=Agree  
c=Disagree  
d=Strongly Disagree  
e=No Opinion/Not Applicable

**About the Course:**

1. The session was helpful in accomplishing my immediate objective(s). a \_\_\_\_\_ b \_\_\_\_\_ c \_\_\_\_\_ d \_\_\_\_\_ e \_\_\_\_\_
2. I received the information I needed. a \_\_\_\_\_ b \_\_\_\_\_ c \_\_\_\_\_ d \_\_\_\_\_ e \_\_\_\_\_
3. Printed materials and handouts were appropriate and useful. a \_\_\_\_\_ b \_\_\_\_\_ c \_\_\_\_\_ d \_\_\_\_\_ e \_\_\_\_\_
4. Information was thoroughly and clearly explained. a \_\_\_\_\_ b \_\_\_\_\_ c \_\_\_\_\_ d \_\_\_\_\_ e \_\_\_\_\_

5. I was referred to other resources and services on or off-campus (if needed). a\_\_\_\_\_ b\_\_\_\_\_ c\_\_\_\_\_ d\_\_\_\_\_ e\_\_\_\_\_
6. My questions were answered. a\_\_\_\_\_ b\_\_\_\_\_ c\_\_\_\_\_ d\_\_\_\_\_ e\_\_\_\_\_
7. There was sufficient time to deal with my concerns. a\_\_\_\_\_ b\_\_\_\_\_ c\_\_\_\_\_ d\_\_\_\_\_ e\_\_\_\_\_
8. The session will be valuable to me in completing my academic, career, and/or personal goals. a\_\_\_\_\_ b\_\_\_\_\_ c\_\_\_\_\_ d\_\_\_\_\_ e\_\_\_\_\_

**About the Instructor:**

9. Demonstrated a genuine desire to help me. a\_\_\_\_\_ b\_\_\_\_\_ c\_\_\_\_\_ d\_\_\_\_\_ e\_\_\_\_\_
10. Was knowledgeable and prepared for the session. a\_\_\_\_\_ b\_\_\_\_\_ c\_\_\_\_\_ d\_\_\_\_\_ e\_\_\_\_\_
11. Made me feel comfortable and welcome. a\_\_\_\_\_ b\_\_\_\_\_ c\_\_\_\_\_ d\_\_\_\_\_ e\_\_\_\_\_
12. Helped me to consider options and examine my alternatives. a\_\_\_\_\_ b\_\_\_\_\_ c\_\_\_\_\_ d\_\_\_\_\_ e\_\_\_\_\_
13. Encouraged me to ask questions and participate in the discussion. a\_\_\_\_\_ b\_\_\_\_\_ c\_\_\_\_\_ d\_\_\_\_\_ e\_\_\_\_\_
14. Listened carefully to me. a\_\_\_\_\_ b\_\_\_\_\_ c\_\_\_\_\_ d\_\_\_\_\_ e\_\_\_\_\_
15. Used the counseling time effectively. a\_\_\_\_\_ b\_\_\_\_\_ c\_\_\_\_\_ d\_\_\_\_\_ e\_\_\_\_\_
16. Allowed adequate time to review printed materials. a\_\_\_\_\_ b\_\_\_\_\_ c\_\_\_\_\_ d\_\_\_\_\_ e\_\_\_\_\_
17. Convened the session on time. a\_\_\_\_\_ b\_\_\_\_\_ c\_\_\_\_\_ d\_\_\_\_\_ e\_\_\_\_\_
18. Demonstrated sensitivity in working with students of diverse racial, ethnic, national origin, and ancestry background; color; sex, gender identity, and sexual orientation; physical and mental ability; medical condition; age; marital status; religious creed; military and veteran's status; and socioeconomic status. a\_\_\_\_\_ b\_\_\_\_\_ c\_\_\_\_\_ d\_\_\_\_\_ e\_\_\_\_\_
19. I feel assured that my discussions will be kept confidential. a\_\_\_\_\_ b\_\_\_\_\_ c\_\_\_\_\_ d\_\_\_\_\_ e\_\_\_\_\_
20. I would recommend this counselor. a\_\_\_\_\_ b\_\_\_\_\_ c\_\_\_\_\_ d\_\_\_\_\_ e\_\_\_\_\_

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Evaluated Faculty Member CWID: \_\_\_\_\_ Processed By: \_\_\_\_\_