

**APPENDIX J3.4**  
**TABULATION OF STUDENT EVALUATIONS FORM**  
**Supplemental Instruction FACULTY – 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 \_\_\_\_\_

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

**About the Supplemental Instruction Session:**

(enter number of responses, not percent)

1. The session was helpful in accomplishing my immediate objective/s. a\_\_\_\_\_ b\_\_\_\_\_ c\_\_\_\_\_ d\_\_\_\_\_ e\_\_\_\_\_

2. I received enough assistance in order to continue my assignment. a\_\_\_\_\_ b\_\_\_\_\_ c\_\_\_\_\_ d\_\_\_\_\_ e\_\_\_\_\_

3. The session helped me understand the step-by-step process used in completing the assignment/problem. a\_\_\_\_\_ b\_\_\_\_\_ c\_\_\_\_\_ d\_\_\_\_\_ e\_\_\_\_\_

4. Information was thoroughly and clearly explained. a\_\_\_\_\_ b\_\_\_\_\_ c\_\_\_\_\_ d\_\_\_\_\_ e\_\_\_\_\_

- |  |                                    |
|--|------------------------------------|
| 5. The atmosphere was conducive to learning.                     | a_____ b_____ c_____ d_____ e_____ |
| 6. My questions were answered.                                   | a_____ b_____ c_____ d_____ e_____ |
| 7. The time allotted was used effectively.                       | a_____ b_____ c_____ d_____ e_____ |
| 8. The session motivated me to return if I need additional help. | 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. Has patience and a positive attitude.  | 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. Spoke clearly so that I could understand the assignment/ problem and how to proceed.   | a_____ b_____ c_____ d_____ e_____ |
| 16. Gave examples and explanations that were appropriate and useful.   | a_____ b_____ c_____ d_____ e_____ |
| 17. Demonstrated knowledge of relevant technology (if appropriate).  | a_____ b_____ c_____ d_____ e_____ |
| 18. Demonstrated respect for individuality and sensitivity to diversity (including racial and ethnic backgrounds, sexual orientations, and physical and mental abilities). | a_____ b_____ c_____ d_____ e_____ |
| 19. I feel that my questions and needs were respected.   | a_____ b_____ c_____ d_____ e_____ |
| 20. I would recommend this instructor.   | a_____ b_____ c_____ d_____ e_____ |

**Division Office Use Only**

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