

Cooke Distance Learning Course Evaluation

Name: _____

Course: _____ Completion Date: _____

Method of Course Presentation:	On-Line	CD-Rom	(please circle one)		
Did you contact an instructor during the course?	Yes	No	(please circle one)		
If you did was it a phone call or E-mail?	Phone	E-Mail	(please circle one)		
Did you have any need to call tech support	Yes	No	(please circle one)		

General Information:	low				high
Was the Cooke staff friendly and courtesy?	1	2	3	4	5
Was the Cooke staff helpful and informative?	1	2	3	4	5
How would you rate your overall experience with the Cooke Staff?	1	2	3	4	5
Was Dearborn's technical support personnel courtesy and friendly?	1	2	3	4	5
How would you rate your overall experience with technical support?	1	2	3	4	5

Instructor: (If you contacted an instructor)	low				high
Demonstrated knowledge of course content	1	2	3	4	5
Encouraged feedback and questions	1	2	3	4	5
Responded to my questions quickly	1	2	3	4	5
Instructor's support of student	1	2	3	4	5
Instructor/student interaction	1	2	3	4	5

Content/Materials:	low				high
Information on website before enrolling accurate	1	2	3	4	5
Orientation was thorough and clear	1	2	3	4	5
Organization of content	1	2	3	4	5
Course objectives clearly stated	1	2	3	4	5
Content was what I expected	1	2	3	4	5
Value of resource materials	1	2	3	4	5

Delivery Method:	low				high
Satisfied with my learning experience.	1	2	3	4	5
I felt I could communicate with an instructor if necessary.	1	2	3	4	5
Program met my needs	1	2	3	4	5
Degree of problems with self paced instruction	1	2	3	4	5
How would you rate your satisfaction with the technology of this computer based course.	1	2	3	4	5

Did you find the orientation session on the introductory module of class satisfactory? _____

If this was a pre or post license course, were you given state exam information or original licensing information on the Cooke website or in the orientation session of the course? _____

List three weakness of the course. _____

List three strengths of the course. _____

What did you expect to cover in this course, but was not? _____

What suggestions do you have to improve this program? _____

What problems, if any, did you have with the computer-based course? _____

Would you recommend this course to a friend? If not, why? _____

We would like to use your comments as a testimonial on our web site. Please state here any comments you would approve for us to use with your name included in the comments: _____

Signed: _____ Date: _____