



NWFP University of Engineering & Technology, Peshawar

Teaching Evaluation Form

Semester (Fall/Spring): _____

Course No. & Name _____

Instructor's Name: _____

Instructions:

1. Chairman shall sign/stamp each form before it is filled by the students.
2. Concerned teacher shall leave the classroom while students are filling this evaluation form.
3. A staff member (clerk/lab assistant) or semester coordinator shall conduct the teacher evaluation.
4. Students shall tick the appropriate column.
5. Pen shall be used for filling this evaluation form.
6. Responsible staff shall submit completed forms in a sealed envelope to the Chairman.

Course and Teacher Evaluation

Q. No.	Description	Rating				
		Excellent	Very Good	Good	Fair	Poor
1	Demonstration of the knowledge of the subject					
2	Instructor's ability to communicate effectively					
3	Preparation for each class					
4	Relevance of homework assignments/quizzes to course work					
5	Quality of feedback on home works/quizzes/midterm exam					
6	Provision of additional material other than text book					
7	Encouragement for class participation and clarity in answering questions					
8	Out of class availability (observance of office hours)					
9	Adherence to scheduled class time					
10	Clarity and accomplishment of course objectives					

Comments (if any): _____

Chairman: _____