

instructor evaluation

TO BE COMPLETED BY STUDENT

Student Full Name _____

Street Address _____

City _____ State _____ Zip _____

Student Email _____

Do you waive your right to review the instructor evaluation? Yes, I waive my right to review. No.

TO BE COMPLETED BY COLLEGE/UNIVERSITY INSTRUCTOR

Reviewer Full Name _____

Title _____

Academic Areas of Instruction _____

College/University _____ School State _____

Email _____ Phone _____

How long have you known this student? Please provide any additional context.

What are the first words that come to your mind that describe this student?

List the course(s)/level(s) in which you have taught this student.

CLASS _____

CLASS _____

CLASS _____

CLASS _____


RATINGS	One of the top few I've encountered (top 1%)	Outstanding (top 5%)	Excellent (top 10%)	Very good (well above average)	Good (above average)	Average	Below average
Academic Achievement							
Intellectual Promise							
Quality of Writing							
Creative, Original Thought							
Contributes to Class Discussion							
Respect Accorded by Faculty							
Disciplined Work Habits							
Maturity							
Motivation							
Leadership							
Integrity							
Reaction to Setbacks							
Concern for Others							
Self-Confidence							
Initiative, Independence							
Overall							

Written Evaluation — *Feel free to attach an additional sheet or reference you have prepared for this student.*

Please share whatever you think is important about this student, which may include a description of academic and personal characteristics as demonstrated in your classroom. We welcome information that will help us to differentiate this student from others. Allegheny values your time and effort and will carefully consider your remarks during the application review.

**I recommend
this applicant to
Allegheny College:**

- Enthusiastically
- Strongly
- Fairly Strongly
- With Reservation

Instructor Signature  _____ Date _____