PIE Course Evaluation

High School: __________________________ Course: __________________________

PIE Instructor: __________________________ Semester/Year: __________________________

1. What are the strengths of the instructor in designing and teaching the course to meet learning objectives?

Comments: __________________________________________________________

________________________________________________________________________

2. How well do course assignments and the instructor's feedback facilitate student learning?

Comments: __________________________________________________________

________________________________________________________________________

3. What is the evidence of student learning of PIE course objectives?

Comments: __________________________________________________________

________________________________________________________________________

4. Are there ways the teacher could improve his/her teaching?

Comments: __________________________________________________________

________________________________________________________________________

I recommend that this course is to be taught in future semesters at this high school: (Check one)

☐ Continue  ☐ Make Adjustments  ☐ Non-Renewal
Liaison: Please complete the section above and submit it, and any supporting documentation, to your Department Chairperson.

After reviewing the information provided by our Department Liaison, my recommendation for this PIE course to be taught in future semesters at this high school is: (Check one)

☐ Continue  ☐ Make Adjustments  ☐ Non-Renewal

Comments: __________________________________________________________

______________________________________________________________________

Chairperson Signature  Date

Department___________________________________________________________

Chairperson: Please return this completed form to the PIE office, 2013
Roseman