Course _____ _____ *Section* _____ *GSI's Name*_____

    (department)   *(number)*   *(number)*

EARLY FEEDBACK FORM

Dear student: Thank you for taking the time to fill out this confidential questionnaire thoughtfully. The information will be used solely by your GSI to assess student satisfaction while the course is still underway.

Please rate the following on a scale of five (strongly agree) to one (strongly disagree). NA=Not applicable.

This graduate student instructor:

		strongly agree	*agree*	*neutural*	*disagree*		
1.	is well prepared for class/lab.	5	4	3	2	1	NA
2.	demonstrates knowledge of the subject matter.	5	4	3	2	1	NA
3.	communicates the subject matter clearly.	5	4	3	2	1	NA
4.	provides helpful comments on exams, assignments, etc.	5	4	3	2	1	NA
5.	encourages class discussion.	5	4	3	2	1	NA
6.	is responsive to students' questions.	5	4	3	2	1	NA
7.	uses effective examples to illustrate points.	5	4	3	2	1	NA
8.	is enthusiastic.	5	4	3	2	1	NA
9.	is friendly and approachable.	5	4	3	2	1	NA
10.	is helpful during office hours.	5	4	3	2	1	NA
11.	overall, is an excellent teacher.	5	4	3	2	1	NA

Please complete the following:

12. My attendance at this section has been approximately _____ %.

13. I have visited this GSI during office hours _____ times.

14. What have been the best aspects of this section/lab?

15. What aspects need improvement? Any suggestions?

16. Additional comments for the GSI: