

# MY FEEDBACK FORM

| S/N                        | PARAMETER  | RESPONSE LEVEL    |                  |                      |
|----------------------------|--|-------------------|------------------|----------------------|
|                            |  | YES<br>(5 points) | NO<br>(0 points) | NOTSURE<br>(3points) |
| 1                          | Are you learning valuable information?           | YES               |                  |                      |
| 2                          | Are the explanations of concepts clear?          |                   |                  | NOT SURE             |
| 3                          | Is the Instructor's delivery engaging?           |                   |                  | NOT SURE             |
| 4                          | Are there enough helpful practice activities?    |                   |                  | NOT SURE             |
| 5                          | Was the course description accurate?             | YES               |                  |                      |
| 6                          | Is the instructor knowledgeable about the topic? | YES               |                  |                      |
| <b>TOTAL SCORE</b>         |  |                   |                  |                      |
| <b>FINAL REMARKS</b>       |  |                   |                  |                      |
| <b>EXCELLENT (5POINTS)</b> |  |                   |                  |                      |
| <b>FAIR (3 POINT)</b>      |  |                   |                  |                      |
| <b>POOR (0 POINTS)</b>     |  |                   |                  |                      |

NAME/SIGNATURE/DATE: **OGUNKUADE AYOBAMIDELE**; \_\_\_\_\_; 02/05/2020