

Teacher Evaluation by Students

Teacher:

Date:

Please read the following statements carefully and tick/check (✓) the box with the response that best indicates your opinion (*Agree, Disagree, Neither agree nor disagree*). You can write your comments in the 'My recommendations' box. Thank you.

		Agree	Disagree	Neither agree nor disagree	My recommendations
1.	My teacher calls me by my name.				
2.	My teacher knows about my interests and goals.				
3.	My teacher is funny.				
4.	I can get in touch with my teacher outside of class.				
5.	My teacher is respectful to me.				
6.	My teacher does not put me down.				
7.	My teacher is not on his/her phone in class.				
8.	I think that my teacher enjoys teaching.				
9.	My teacher keeps his/her word.				
10.	My teacher is friendly and approachable.				
11.	I am not afraid to make a mistake in class.				
12.	We work in pairs and groups in class.				