

# UCSC Instructor Evaluation Form

## COVER SHEET

### IMPORTANT:

For each class, please complete and submit a separate Cover Sheet along with the completed Scantron forms. Each Cover Sheet should include the course number, instructor, quarter, and year of the class so that it can be processed accurately. Please make copies of this Cover Sheet as needed.

### Please provide LEARNING TECHNOLOGIES the following class information:

Quarter/Year: _____	Department: _____
Course Number: _____	
Course Title: _____	
Instructor: _____	
Number of forms submitted: _____	Total enrolled: _____
<input type="checkbox"/> Check if <b>Section IV Department Specific Issues</b> is used.	
Date results are needed: _____ ( <i>minimum one month turnaround required</i> )	
<b>Department Contact to receive Scantron forms and Summary Report (i.e., text file)</b>	
Name: _____	
Extension: _____	Email: _____
***Physical Address: _____ ***	

\*\*\*Instructors and Students: Please return Scantron forms to the Department Contact listed above.

### DEPARTMENT CONTACTS ONLY

Deliver this form with completed Scantrons to:

**Learning Technologies**

**Kerr Hall 149**

Check here if you want Learning Technologies to return the evaluations via Campus Mail

Name: \_\_\_\_\_

Mail Stop: \_\_\_\_\_

### Learning Technologies Use Only

Date Received: \_\_\_\_\_

File Name: \_\_\_\_\_

# of forms scanned: \_\_\_\_\_