

ACTS, Inc. Teacher Evaluation Form

(Teachers, this form is distributed by the Officers on or about November 1st and March 1st. We encourage parents to be thorough, constructive, and positive with their feedback. We will collect and review these forms, and will then give them to you. The teacher liaison will contact each of you following our review of the evaluations to encourage and assist you in any way we can. In addition to these written evaluations, we encourage parents to contact you directly throughout the year about concerns or requests.)

Date: _____

Class: _____ Teacher: _____

Please answer the following questions using a scale from 1 to 3 (or yes/no when appropriate).

1 = never 2 = sometimes 3 = always

Is the teacher prepared?	1	2	3	Is the amount of assigned work reasonable?	1	2	3
Are the assignments clear?	1	2	3	Are students given enough individual help?	1	2	3
Is the subject covered sufficiently?	1	2	3	Is communication with parents sufficient?	1	2	3
Are students held accountable for homework?	1	2	3	Is the materials fee appropriate?	yes	no	
Are students encouraged to participate in class?	1	2	3	Were the stated objectives of the class met?	yes	no	
Does the teacher provide and follow a syllabus?	1	2	3	Is the curriculum appropriate?	yes	no	
Is the classroom orderly and positive?	1	2	3	Is the teacher knowledgeable in the subject?	yes	no	

If you answered 1, 2, or no to any of the above questions, please constructively explain why:

Describe any other difficulties or concerns with this class or teacher including constructive suggestions:

Would you recommend this class to a friend? Why or why not?

Offer specific comments on the benefits and strengths this class and teacher provided: