

## Course Experience Feedback

Fleming College believes in the continual improvement of our courses to ensure we provide quality education. Course Experience Feedback provides an opportunity for you to reflect on your course experiences (both virtual and/or in-person) and communicate what you feel is working well and/or where there is room for improvement.

Your participation in this survey is voluntary. Your responses are confidential and will be processed by Fleming College's Institutional Research Office. Faculty and School Managers will receive a grouped summary of Course Experience Feedback responses before the end of the course. **No information that could personally identify you will be reported with these results.**

The information asked for in this survey is collected under the legal authority of subsection 8(2) of Ontario Regulation 34/03 made under the Ontario Colleges of Applied Arts and Technology Act, 2002. The information obtained from your participation in this survey will be used strictly for the purposes of research and/or academic planning. At all times, personal information will be processed and protected in accordance with the privacy safeguards set out in the Freedom of Information and Protection of Privacy Act.

If you have any further questions about the information collected in this survey, please contact:

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By clicking **Next** below, you acknowledge that you have read this information and agree to participate in this survey, with the understanding that you can withdraw at any time.

**Select a Course: \***

All of your courses and/or faculty may not be available for feedback.

Once you complete this form for a course, that course will no longer appear in the dropdown list.

< Dropdown >

**Select a Component of ###Course###: \***

You can provide feedback for one component (e.g., Class/Lecture, Lab, OR Seminar) of each available course.

< Dropdown >

**Select a Faculty for the ###Class/Lecture, Lab, OR Seminar### component of ###Course###: \***

You can provide feedback for one faculty for each available course.

< Dropdown >

## Course Experience Feedback

When answering these questions, please think about your **###Class/Lecture; Seminar; or Lab###** experiences with **###Faculty Name###** in the **###Course###** course.

Select the option for each statement, according to the scale provided, that best reflects your experiences in this course. If a statement is not applicable, you can leave it blank.

1. I participate and/or contribute constructively in class. (ask related questions, offer feedback to fellow students, contribute ideas, etc.)

**Always**      **Often**      **Sometimes**      **Rarely**      **Never**  
                       

2. I read assigned materials in preparation for this course.

**Always**      **Often**      **Sometimes**      **Rarely**      **Never**  
                       

3. I have accessed one or more of the following services to enhance or support my learning: tutoring, accessible education services, counselling services, library tutorials, consultation of faculty outside of class, etc.

**Always**      **Often**      **Sometimes**      **Rarely**      **Never**  
                       

4. The number of hours I typically spend **per week** on this course completing readings, reviewing notes, writing papers and other course-related work (outside of class time) is:

**None (0)**      **One (1)**      **2 to 4**      **5 to 9**      **10 or more**  
                       

5. The number of classes I have missed in this course is:

**None (0)**      **One (1)**      **2 to 4**      **5 to 9**      **10 or more**  
                       

- |   | <b>Always</b>         | <b>Often</b>          | <b>Sometimes</b>      | <b>Rarely</b>         | <b>Never</b>          |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| 6. I am satisfied with my effort in this course.                            | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 7. I feel this course is valuable to me.                                    | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 8. The content in this course aligns well with other courses in my program. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

## Course Experience Feedback

When answering these questions, please think about your **###Class/Lecture; Seminar; or Lab###** experiences with **###Faculty Name###** in the **###Course###** course.

Select the option for each statement, according to the scale provided, that best reflects your experiences in this course. If a statement is not applicable, you can leave it blank.

- 9. The following help(s) my learning in this course:**
- |  | Always                | Often                 | Sometimes             | Rarely                | Never                 |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| a. In-class activities   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| b. Course resources (manuals, handouts, resources on D2L, videos, etc.)                              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| c. Assessments (projects, assignments, tests, etc.)  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| d. Feedback from faculty   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| e. Which of the following is <b>MOST</b> helpful for your learning in this course? (Select only ONE) |                       |                       |                       |                       |                       |
| <input type="radio"/> In-class activities  |                       |                       |                       |                       |                       |
| <input type="radio"/> Course resources (manuals, handouts, resources on D2L, videos, etc.)           |                       |                       |                       |                       |                       |
| <input type="radio"/> Assessments (projects, assignments, tests, etc.)                               |                       |                       |                       |                       |                       |
| <input type="radio"/> Feedback from faculty  |                       |                       |                       |                       |                       |

- | <b>I feel that ...</b>                              | Always                | Often                 | Sometimes             | Rarely                | Never                 |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| 10. The course outline is followed.                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 11. Expectations are clear.                         | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 12. The feedback I receive is useful.               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 13. A variety of learning activities are used.      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 14. I am able to understand the material presented. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 15. Technology is used well.                        | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 16. I am treated with respect.                      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 17. The classroom is managed well.                  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 18. I am encouraged to participate.                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 19. I have adequate support outside of class time.  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Please click **Done** below to submit your feedback for this course.