

Home Study/Distance Learning Course Evaluation

Student's Name (Optional): _____ Phone (Optional): _____

Course Title: _____

Name of the Instructor: _____

Date of Course Completion: _____

1. I will use the information that I have learned in my practice.

1 2 3 4 5 6 7

Strongly Agree

Agree

Strongly Disagree

2. The course was challenging and motivated me to learn.

1 2 3 4 5 6 7

Strongly Agree

Agree

Strongly Disagree

3. The number of CEs the course offered directly correlated with the time it took me to complete the course.

1 2 3 4 5 6 7

Strongly Agree

Agree

Strongly Disagree

4. The course material matched the learning objectives.

1 2 3 4 5 6 7

Strongly Agree

Agree

Strongly Disagree

5. The course information was well organized.

1 2 3 4 5 6 7

Strongly Agree

Agree

Strongly Disagree

6. The information was relevant to the massage therapy profession.

1 2 3 4 5 6 7

Strongly Agree

Agree

Strongly Disagree

7. The information asked on the test was consistent with the course material.

1 2 3 4 5 6 7

Strongly Agree

Agree

Strongly Disagree

8. I would suggest this course and instructor to a peer.

1 2 3 4 5 6 7

Strongly Agree

Agree

Strongly Disagree

9. I rate my overall course experience as excellent.

1 2 3 4 5 6 7

Strongly Agree

Agree

Strongly Disagree

10. This course was worth the money I paid to take it.

1 2 3 4 5 6 7

Strongly Agree

Agree

Strongly Disagree

11. This course was worth my time.

1 2 3 4 5 6 7

Strongly Agree

Agree

Strongly Disagree

Comments:
