

## WKCTC Adult Education Program

### Student Evaluation

We want to do the very best job we can to help you reach your goals. Your input is very valuable to us. Please tell us about your experiences here. We hope that you feel free to list any concerns you have about the program.

**1. How did you learn about our program? Please Circle.**

Family Member/Friend	KET
Public Agency	Public Schools/Board of Education
Employer	College
Attended Before	Employment/Training center
Courts/Judicial System	Other: _____
Media/Brochure	

**2. What are your goals for coming to this program? You may select more than one. Please Circle.**

To earn a GED  
To Obtain a Job  
To Improve Basic Skills  
To improve English Language Skills (ESL)  
To enter College  
To be removed from Public Assistance  
To Obtain Citizenship Skills  
To Register to Vote  
Other: \_\_\_\_\_

**3. The most convenient time for me to come is: Please Circle.**

Mornings Afternoons Evenings Saturdays

**4. I have been coming to the program for: Please Circle.**

Less than 1 Month 1-2 Months 3-6 Months 7-9 Months 10-12 months More than 1 Year

**Please indicate the frequency of your participation in the following: Please Circle.**

**5. I usually attended classes:** 1 day a week 2 days a week 3 days a week 4 days a week 5 days a week

**6. I scheduled & attended tutoring:** Never Often Daily Weekly Every 2 Weeks Monthly

**7. On the average, I studied more than 4 hours a week at home.** Yes No

**8. On the average, I studied less than 4 hours a week at home.** Yes No

**9. I studied on the computer at home.** Yes No

**10. How often did you study on the computer at home?** \_\_\_\_\_

**11. I discussed my progress with the instructors.** Yes No

**12. Do you think you are reaching your goals?** Yes No

**Why or Why Not?** \_\_\_\_\_

**13. Would you tell someone to come here?** Yes No

**Why or Why Not?** \_\_\_\_\_

**PLEASE TURN OVER & COMPLETE THE OTHER SIDE**

**Please circle the best answer to the following statements.**

- |   |     |    |          |     |
|---|-----|----|----------|-----|
| 14. I am comfortable in the center/classroom.                                 | Yes | No | Not Sure | N/A |
| 15. The instructors & staff are helpful; friendly, positive, and encouraging. | Yes | No | Not Sure | N/A |
| 16. The instructors & staff talk to me about my goals.                        | Yes | No | Not Sure | N/A |
| 17. The instructors know the material & help me to learn.                     | Yes | No | Not Sure | N/A |
| 18. I like learning on the computer.  | Yes | No | Not Sure | N/A |
| 19. I like learning with textbooks.   | Yes | No | Not Sure | N/A |
| 20. I like one-on-one instruction.  | Yes | No | Not Sure | N/A |
| 21. I like studying by myself.  | Yes | No | Not Sure | N/A |
| 22. I like learning in small groups.  | Yes | No | Not Sure | N/A |
| 23. I like lecture when the teacher teaches the whole class at once.          | Yes | No | Not Sure | N/A |
| 24. My overall experience in this center/class was good.                      | Yes | No | Not Sure | N/A |

25. What do you wish we would do differently?

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26. What do you think is the best thing we do here?

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27. My instructor/instructors were or the person/persons who helped me were: Circle all that apply.

- |                  |               |                |               |
|------------------|---------------|----------------|---------------|
| Betty Myrick     | Linda Moore   | Cathy Hasty    | Kevin O'Neill |
| Stephanie Scheer | Sheryl Wilmes | Sandra Bowen   | Kaila Deering |
| Michelle Ertle   | Beth Resnick  | Matt McDermott |               |

28. Is there anything else you would like to tell us?

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**Thank you for your help!**

**Please return as soon as possible in the enclosed stamped, self-addressed envelope.**