

## COURSE & INSTRUCTOR EVALUATION

RE 318A (Rev. 7/18)

The purpose of this evaluation is to further assist the Department of Real Estate in better serving the educational needs as offered by DRE approved course providers. Your responses below will greatly assist in this effort.  <b>Return to:</b> Department of Real Estate Attn: Education Section 1651 Exposition Blvd PO Box 137009 Sacramento, CA 95813-7009	NAME (OPTIONAL)	
	COURSE TYPE <input type="checkbox"/> PRE-LICENSE <input type="checkbox"/> CONTINUING EDUCATION	DATE COURSE TAKEN (MONTH AND YEAR)
	METHOD OF PRESENTATION <input type="checkbox"/> SEMINAR/LIVE <input type="checkbox"/> INTERNET <input type="checkbox"/> CORRESPONDENCE/HOME STUDY	
	COURSE TITLE	
	COURSE PROVIDER NAME	
COURSE INSTRUCTOR NAME (IF APPLICABLE)		

### EVALUATION

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	NA
<b>INSTRUCTOR</b>						
Well prepared	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Began and ended on time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrated knowledge of course material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provided relevant examples	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responded accurately to questions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>CONTENT/MATERIAL</b>						
Included clear learning objectives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Organized logically	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Current and relevant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Easy to understand	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>COURSE DELIVERY</b>						
Easy to access	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quizzes were reflective of course material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Final exam was reflective of course material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>I WOULD RECOMMEND THIS COURSE</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

COMMENTS

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I would like to further discuss this evaluation with a DRE staff member. Please contact me at the following number or email address during regular business hours.

TELEPHONE NUMBER

EMAIL ADDRESS