

# IKC TFH School Online Course Student Evaluation Form

**Class Date** \_\_\_\_\_

**TFH Workshop** \_\_\_\_\_

**Instructor** \_\_\_\_\_ **Country** \_\_\_\_\_

**Online platform used** (zoom, google rooms, etc.) \_\_\_\_\_

Please fill out the evaluation so we can learn ways to better improve our ability to communicate and utilize the technology to best serve our students.

We ask that at minimum you fill out the scale of 1 – 10 with **10 being the best**.

We will very much appreciate your additional feedback in more detail below too.

Please highlight or somehow note the number that reflects your evaluation.

## **A. Instructor –**

Communication                    1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10

Knowledgeable                    1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10

Pacing the class                    1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10

Teaching Methods                    1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10

Connection w/ Students                    1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10

**Any other feedback about instructor** (more detailed from above categories or other)

## **B. Use of Technology**

|   |   |
|---|---|
| Easy to connect to the meeting  | 1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10                      |
| Student connection was stable   | 1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10                      |
| Instructor's connection was stable  | 1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10                      |
| Easy to navigate options<br>such as mute, video, etc.   | 1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10                      |
| Able to see clearly charts used?  | 1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10                      |
| Was screen share used?  | Yes _____ No _____  |
| If yes, did you find it helpful to<br>see material on the computer vs.<br>the instructor and other students<br>for those parts it was used? | 1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10                      |
| Background or noise distractions-<br>Was this a problem for you?  | 1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10<br>(Yes = 1 No = 10) |

### **Other comments about your experience with the technology:**

#### **Your Experience as a Student**

|   |  |
|---|--|
| I found it helpful to do<br>Online training | 1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10 |
| I had someone to practice on<br>at my home  | Yes _____. No _____                    |

**If** some form of self-assessing muscle function was used, rate any of the following, or another method that was used.

I found it easy to learn/use:

Self-noticing muscle function through the range of motion of the muscle test                      1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 - 10

Self-applying pressure in contracted position                                      1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10

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I could see the demonstrations easily and clearly                      1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 - 10

I understand how to do the balancing process                                      1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 - 10

I found the course valuable    1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10

General comments/suggestions/ feedback to your instructor:

Your suggestions can be helpful for feedback to your instructor (and IKC) to help us improve your and other students' learning experience using this new method of teaching. **Thank you.**