Dear TOP Student,

Our records indicate that you received assistance this term from the TOP Peer Tutoring Program. Please take a moment to fill out the evaluation form below and return it in the enclosed self-addressed stamped envelope. We rely greatly on your input to maintain and improve our program. Thank You!

## **Peer Tutor Evaluation**

Transfer Opportunity Program Peer Tutoring Program

Peer Tutor:Course Tutored:Term Tutored:								
Please indicate the following by circling the appropriate rating:								
	Fair	3 - Average	4 - G	lood	5 - E	xcellen	t	
<u>Peer Tutor</u>								
Fosters a positive learning environ	ment		1	2	3	4	5	
Patient and good listener			1	2	3	4	5	
Uses good communication skills			1	2	3	4	5	
Arrives on time			1	2	3	4	5	
Met all scheduled appointments			1	2	3	4	5	
Knowledgeable in subject area rec	luested		1	2	3	4	5	
Creative in meeting my learning st	yle		1	2	3	4	5	
Stayed on task and professional			1	2	3	4	5	
Demonstrated genuine concern			1	2	3	4	5	
Followed up on my academic prog	ress		1	2	3	4	5	
Overall evaluation of Tutor			1	2	3	4	5	
What did your Tutor do especially	well?							
In what area(s) did (he, she) need	improver	nent?						
Peer Tutoring Program								
I was contacted in an appropriate a	amount o	t time		1	2	3	4	5
after I submitted a request.					•	•		_
TOP staff made sure I was being h	nelped ac	cording		1	2	3	4	5
to my needs.	_				-	-		_
Overall evaluation of Peer Tutoring	g Progran	1		1	2	3	4	5
How did the Peer Tutoring Program	n help yo	u?						
How did the program compare with	n your exp	pectations?						
How do you think the program cou	ld bo imp	rovod2						
Would you recommend this progra	m to othe	er students?	Yes			No		
OP Student: Date Please return this form to the Peer Tutor Program Assistant								
r lease retain this form to the ricer ration r rogram Assistant								