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**Adventures in Learning**

### Study Group Leader Self Evaluation Form

Thank you for leading a course for AIL! Please use this formto share your reflections, comments and suggestions based on your experience this term. Your responses and those of other course leaders will benefit future instructors and participants. Please complete and return the form to the AIL Office.

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| **Study Leader/Moderator:** | Click or tap here to enter text. |
| **Course Name:** | Click or tap here to enter text. |
| **Course Venue:** | Click or tap here to enter text. |
| **Term & Year Offered:** | Click or tap here to enter text. |

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| **1. What did you find most rewarding about leading this course?** |
| Click or tap here to enter text. |

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| **2. Would you lead this course again? Why/not?** |
| Click or tap here to enter text. |

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| **3. Would you consider leading a different course in the future? If yes, on what topic(s)?** |
| Click or tap here to enter text. |

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| **4. What unexpected challenges arose that you feel the Curriculum Committee should be aware of?** |
| Click or tap here to enter text. |

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| **5. How satisfied were you with the equipment and/or technology that you used? Please explain.** |
| Click or tap here to enter text. |

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| **6. How satisfied were you with the course venue? Please explain.** |
| Click or tap here to enter text. |

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| **7. Was the use of Zoom effective for your course? Please explain.** [ ]  **YES** [ ]  **NO** [ ]  **N/A** |
| Click or tap here to enter text. |

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| **8. How could the Curriculum Committee or AIL staff better support you?**  |
| Click or tap here to enter text. |

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| **9. Would you consider offering a condensed version of your course as a lecture at Woodcrest Assisted Living or as a Lunch & Learn offering?**  |
| Click or tap here to enter text. |

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| **10. Who from your course or otherwise do you recommend as a future study leader?**  |
| **Name:** | Click or tap here to enter text. |
| **Email & Phone:** | Click or tap here to enter text. |
| **Potential topic(s):** | Click or tap here to enter text. |

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| **11. Any other thoughts or recommendations?**  |
| Click or tap here to enter text. |

**Thank you! Please return completed forms to the AIL Office by doing one of the following:**

* Dropping off at Danforth hall / leaving in the AIL mailbox in the foyer of Lethbridge Lodge
* Emailing this document as an attachment to adventures@colby-sawyer.edu
* Printing and mailing this document to AIL, 541 Main St., New London, NH 03257