Office of Diversity, Equity and Multicultural Affairs

MINORITY OPPORTUNITY RESEARCH EXPERIENCE

Connecting Underrepresented Students to Opportunity and Education at IU Northwest

Student Evaluation Form

The Office of Diversity, Equity and Multicultural Affairs and Academic Affairs wants to ensure that your MORE experience was the best one possible. Please provide your evaluation of both the program and your faculty mentor. Your answers will be held in the strictest confidence. Please darken the circle of your response.

Thank you.

PROGRAM

1. Fulfillment of advertised promises ...........................
2. Quality of orientation ...........................................
3. Quality of staff interaction ....................................
4. Usefulness as a learning/awareness tool ................
5. Overall rating of the program ............................... 

In what specific ways did the MORE program meet (not meet) your expectations?
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

FACULTY MENTOR

1. Quality of explanations .................................
2. Ability to relate research to real circumstances ...
3. Organization and flow of information ..............
4. Ability to make subject interesting and enjoyable
5. Ability to give practical and useful subject examples
6. Response to questions and comments ............
7. Knowledge of the subject ..............................
8. Usage of your talents/abilities ........................
9. Overall rating of the faculty mentor ...............
ABOUT YOU
1. Rate your knowledge of research before MORE..
   1  2  3  4  5  6  7  8  9  10
2. Rate your knowledge of research after MORE ....
   1  2  3  4  5  6  7  8  9  10
3. Rate your desire to share what you’ve learned ....
   1  2  3  4  5  6  7  8  9  10
4. Rate your desire to do more research ................
   1  2  3  4  5  6  7  8  9  10

PLEASE SHARE ANY ADDITIONAL COMMENTS OF YOUR CHOICE

May your comments be edited and used for future promotions? No ___ Yes ___ If yes, please indicate by signature:

THANK YOU!

Please return your evaluation to Kevin Bryant, nwode@iun.edu