Math in the Middle
Daily Evaluation Form

Name (optional): _______________________________ Date: ____________________ Course: ____________________

Your comments will help us improve the Institute. Use the back side if needed.

1. Rate today’s content (one is lowest, five is highest)  1  2  3  4  5
   Comments:

2. Rate today’s instruction (one is lowest, five is highest)  1  2  3  4  5
   Comments:

3. What work was helpful today? Did at least one new insight grow out of today’s sessions? If yes, what?

4. What suggestions do you have for improving today’s sessions?

5. Did anything presented today affect your mathematical thinking and/or your attitude toward math?

6. Do you have a “burning” question as a result of today’s session? If yes, what?

7. Do you have any other comments, suggestions or questions?