

**Alaska Gateway School District**  
**STUDENT FEEDBACK - TEACHER FORM**  
 Middle through High School

*Directions:* As part of our teacher evaluation system, we are asking students to give us information about how they perceive the teacher's performance. Please respond to the following statements by placing an "X" in the column which best describes your experience with this teacher.

\_\_\_\_\_  
 (Teacher's name)

| This teacher:  | Never | Some-<br>times | Often | Always | Don't<br>Know |
|--|-------|----------------|-------|--------|---------------|
| Discusses and responds to my concerns.   |       |                |       |        |               |
| Informs me of my achievements and problems in a timely fashion.                          |       |                |       |        |               |
| Treats me as an individual, not just part of the group.                                  |       |                |       |        |               |
| Expects me to behave & do well in class.   |       |                |       |        |               |
| Encourages me to stay on task.   |       |                |       |        |               |
| Keeps the classroom safe and orderly.  |       |                |       |        |               |
| Solves disciplinary situations fairly.   |       |                |       |        |               |
| Is positive and friendly to me, my family, parents, community & students.                |       |                |       |        |               |
| Is a positive role model.  |       |                |       |        |               |
| Maintains a productive, professional relationship with me and my parents.                |       |                |       |        |               |
| Works to make the subject matter interesting.  |       |                |       |        |               |
| Is available to me for extra help as needed in problem areas.                            |       |                |       |        |               |
| Makes me feel comfortable in contacting him/her when needed.                             |       |                |       |        |               |
| Shows interest and works to make sure all students learn the subject being taught.       |       |                |       |        |               |
| Encourages questions and participation in class.   |       |                |       |        |               |
| Shows knowledge and can answer questions about the subject matter being taught in class. |       |                |       |        |               |
| Explains class expectations clearly and is understood by all students.                   |       |                |       |        |               |

Comments:

Forms must be signed to be considered.

\_\_\_\_\_  
 Student signature

\_\_\_\_\_  
 Date