

**UNIVERSITY OF PERADENIYA
FACULTY OF SCIENCE
FACULTY QUALITY ASSURANCE CELL**

FIELD VISITS EVALUATION FORM

This evaluation is intended to obtain student’s feedback on the field visits.

Please do not write your name or registration number on this evaluation sheet.

Instructor’s Name: **Academic Year:**

Course Code/Title: **Semester:**

In the following indicate your choice by marking a “√” in the appropriate box

No.	Comment	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
1	Aims, objectives and learning outcomes of the field trip were explained prior to the visit					
2	Location/place selected was appropriate to meet the learning outcomes					
3	The instructor was helpful during field visits					
4	Field visits were useful to strengthen the knowledge and the interest in the subject area					
5	Prior and post-visit discussions were productive and effective					
6	Field visits were useful in experiencing real-world examples/applications					

Any other comments:

Instructions to the person who administers the evaluation process

- This envelope is not to be opened in the presence of the instructor.
- Open the envelope and distribute one copy of the evaluation form to each student in the class.

Instructions to students (Please read)

- Give your honest opinions about the instructor and the course.
 - The Office of the Dean will make arrangements to analyze the evaluation forms.
 - These evaluations will be made available to the instructor only after the final grades are released.
 - You are advised to give written comments, if any, in the space provided.
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- Once completed, all the forms must be enclosed in a sealed envelope.
 - Place your signature with the name and the date.
 - Return the envelope immediately to the office of the Head of the relevant Department.