Applied Lesson Instructor Evaluation Form

TO BE COMPLETED BY STUDENTS ENROLLED IN APPLIED LESSONS

As the year comes to an end, the Department of Music asks for your help in evaluating the instruction you have received. Please complete this form to reflect your thoughts about your lessons. Please do not sign your name. Return this form directly to your applied instructor through the campus Post Office as soon as possible. Thank you for your input.

Instructor: ______________________________________ Instrument/Voice: ____________________

1. For how many semesters have you studied with this instructor? ___

2. Did this instructor give you a written statement outlining expectations, grading, practice routines, materials, etc.?

☐ YES ☐ NO

For each of the following questions, please circle the answer that best reflects your opinion.

3. The instructor clearly explained how to practice and make improvements in my performance.

SA A D SD N

4. The instructor helped me grow as a musician and become more aware of musical style and expression.

SA A D SD N

5. The instructor’s criticisms of my performance were constructive.

SA A D SD N

6. The instructor complimented me when I performed well or made improvement.

SA A D SD N

7. The materials used for my lessons were interesting and helped in my development.

SA A D SD N

8. The instructor was able to accurately assess my level of performance at the beginning of the semester and help me progress from that point.

SA A D SD N

9. The instructor impressed me as a knowledgeable professional musician.

SA A D SD N

10. The instructor was able to demonstrate what was desired by way of tone, technique, and style in performance.

SA A D SD N

11. The instructor is enthusiastic and energetic.

SA A D SD N

12. I felt comfortable talking with my instructor.

SA A D SD N

Please include additional comments in the space below; continue on reverse if necessary.