



**Waseca Public Schools
Independent School Dist. 829**

Teacher Development and Evaluation
Grades 7-12 Student Feedback Form Option C
Based on the Minnesota Dept. of Education Model Survey

Directions: Please answer the questions to the best of your ability based on your experience in this class.

Teacher: _____ Year/Period: _____

What do you like best about this class?

What do you like least about this class?

What else should your teacher know about how you felt about this class?