

## Service-Learning Evaluation Form for University Professors

**Name (optional):**

**Number of Students:**

**Course (optional):**

**Service Site:**

1. What was your primary reason for offering this project?

2. What was your favorite part of this project?

3. How does this course compare with your non-Service-Learning courses? (1 = Strongly Agree, 5 = Strongly Disagree)

It took more time to prepare this one.

1 2 3 4 5

It engaged my students more.

1 2 3 4 5

It allowed for my students' input and leadership.

1 2 3 4 5

It provided my students with more opportunities to practice the skills gained in class.

1 2 3 4 5

4. How much time, in hours, did your students spend in preparing for, participating in, and reflecting on this project?

**0**

**1-3**

**4-6**

**7-10**

**10+**

5. If you taught this course again...

What would you add/delete/change to make it better?

What would you keep the same?

6. Are you more or less willing to participate in service-learning now that you have completed this project? (circle one)

**More**

**Less**

7. How have you impacted the academic aspirations and achievement of elementary students from low-income families?

8. How helpful was the service-learning coordinator? What resources did she provide?