TA (Instructor's) Name		**Course (Prefix & Number)**
	Mid-Course Feedback Form	
Section Number	**Keep – Stop – Start**	**Semester**

The object of completing this mid-course feedback form is to provide constructive information to your instructor before the end of the semester so that adjustments/changes may be implemented in an effort to supplement student learning. Only the instructor will see this feedback. Please be open and honest with your responses as all comments will remain anonymous.

1. Please write down one thing you would like the instructor or the class to **keep** doing.

2. Please write down one thing you would like the instructor or the class to **stop** doing.

3. Please suggest one thing you would like the instructor or the class to **start** doing.

Thank you.