

STATE OF WASHINGTON
OFFICE OF THE INSURANCE COMMISSIONER
PRE-LICENSE EDUCATION
LECTURE COURSE EVALUATION

Provider name: _____
Course name: _____
Instructor name: _____
Date: _____

	Strongly Disagree	Disagree	Not Applicable	Agree	Strongly Agree
1. The instructor is knowledgeable about the subject.	1	2	3	4	5
2. The instructor answered my questions.	1	2	3	4	5
3. The instructor provided clear information about the insurance terms and concepts.	1	2	3	4	5
4. Examples/scenarios given by the instructor were helpful.	1	2	3	4	5
5. The time spent by the instructor on each topic was appropriate.	1	2	3	4	5
6. The course handouts/homework/quizzes made it easier to learn the material.	1	2	3	4	5

7. Did you encounter any problems or concerns?

8. What changes would you suggest?

Student signature _____