CDL Peer Tutor Feedback Form

Please take a few moments to complete this Peer Tutor Feedback form. Your feedback is very important to the success of the CDL Peer Tutor Program. Feedback received will provide us the opportunity to improve upon the program.

Student ID: ___________________________ Date: __________________

Tutor Name: __________________________________________________

Tutored Course #: ___________ Tutored Course Name: ________________

Tutee Name: ____________________________________________________________________

PART I:
Please select the number which best indicates your overall experience:

NA = not applicable  1=strongly disagree  2= disagree  3=Neutral  4=agree  5=strongly agree

1. Empire State College supported my tutoring efforts.
2. I was prepared for each tutoring session.
3. The communication method used was effective to tutor at a distance.
4. I feel my efforts made a positive impact on the tutee.
5. The tutee communicated with me regularly.
6. I would serve as a peer tutor again.

PART II:
Please provide more detail on the tutoring program as it relates to your responses above:

1. Expand upon how the CDL Office of Academic Support could be more effective in supporting your efforts as a tutor? Did we communicate and support your efforts? Did we provide you with the necessary resources for you to be an effective tutor?

____________________________________________________________________________

____________________________________________________________________________

2. Please expand on how you prepared for each tutoring session. Do you feel you effectively prepared for each tutoring session?

____________________________________________________________________________

____________________________________________________________________________

REV. 07/15/09
3. What communication method(s) did you use with the tutee? Would you recommend one type over another? Or other communication methods?

________________________________________________________________________

________________________________________________________________________

4. Do you feel that your tutoring efforts made a positive impact on the tutee?

________________________________________________________________________

________________________________________________________________________

5. Did your tutee communicate with you regularly? Did you feel you had a handle on what your tutee needed to be successful?

________________________________________________________________________

________________________________________________________________________

6. How would you describe the overall tutoring experience? Please share and feedback that you feel would be helpful for the peer tutor coordinators to know.

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