

**Department of Horticulture  
TEACHING ASSISTANT EVALUATION**

To be completed by graduate student

Student Name:

Course:

Date:

To be completed by students enrolled in the course

Please rate using the scale 1= unacceptable, 2 = poor, 3 = fair, 4 = good, 5 = excellent  
(Leave blank if the statement does not apply.)

Information explained clearly	1	2	3	4	5
Had a good presentation/lecture style	1	2	3	4	5
Well-prepared	1	2	3	4	5
Showed interest in students	1	2	3	4	5
Provided helpful comments	1	2	3	4	5
Availability outside class	1	2	3	4	5
Overall Rating	1	2	3	4	5

Please provide additional comments regarding strengths and weaknesses that could help improve the quality of the graduate student's teaching.

Strengths:

Weaknesses: