

# COLLEGE OF SOUTHERN IDAHO

## EVALUATION FORM FOR GENERAL EDUCATION COURSES

Knowledge Area \_\_\_\_\_ Department \_\_\_\_\_

Course Number \_\_\_\_\_ Title \_\_\_\_\_

Prerequisite(s) \_\_\_\_\_

### CRITERIA FOR GENERAL EDUCATION COURSES AT CSI

- |                          |                          |    |  |
|--------------------------|--------------------------|----|--|
| <input type="checkbox"/> | <input type="checkbox"/> | 1. | Content from the major knowledge areas of Communications; English; Behavioral & Social Science: Humanities, Fine Arts and Foreign Languages; Natural Science; and Mathematics. |
| Yes                      | No                       |    |  |
| <input type="checkbox"/> | <input type="checkbox"/> | 2. | Collegiate level.  |
| Yes                      | No                       |    |  |
| <input type="checkbox"/> | <input type="checkbox"/> | 3. | Taught by qualified faculty.   |
| Yes                      | No                       |    |  |
| <input type="checkbox"/> | <input type="checkbox"/> | 4. | Expected outcomes stated in the course syllabus in relation to the College's mission and goals.  |
| Yes                      | No                       |    |  |

**In the section below, indicate how each core criteria is addressed in the course by placing a check mark in the appropriate box and explain which goals in your syllabus support your rating.**

- 0 = Criteria not addressed
- 1 = Criteria minimally addressed
- 2 = Criteria addressed as a secondary goal
- 3 = Criteria addressed as a major goal

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|--------------------------|--------------------------|--------------------------|--------------------------|----|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 5. | Provide a broad-based survey of a discipline and show the interconnectedness of knowledge. |
| 3                        | 2                        | 1                        | 0                        |    |  |
| _____                    |                          |                          |                          |    |  |
| _____                    |                          |                          |                          |    |  |
| _____                    |                          |                          |                          |    |  |
| _____                    |                          |                          |                          |    |  |

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|--------------------------|--------------------------|--------------------------|--------------------------|----|----------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 6. | Develop a discerning individual. |
| 3                        | 2                        | 1                        | 0                        |    |                                  |
| _____                    |                          |                          |                          |    |                                  |
| _____                    |                          |                          |                          |    |                                  |
| _____                    |                          |                          |                          |    |                                  |
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□ □ □ □  
3 2 1 0

7. Practice critical thinking and problem-solving skills.

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3 2 1 0

8. Promote awareness of social and cultural diversity in order to appreciate the commonality of mankind.

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3 2 1 0

9. Foster the balance between individual needs and the demands of society.

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3 2 1 0

10. Reinforce reading, writing, speaking, and/or quantitative skills.

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3 2 1 0

11. Encourage and inspire life-long learning.

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3 2 1 0

12. Encourage creativity.

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If, based upon this evaluation, the consensus among the departmental faculty is that the course, as currently constituted, inadequately addresses the intended course goals, indicate what ways the department recommends the course be changed and when. If no changes are needed, leave this space blank.

3. Submitted by:

Signature of Principal Preparer \_\_\_\_\_ Date \_\_\_\_\_

Signatures of Others Who Regularly Teach This Course	_____	Date _____
	_____	Date _____
	_____	Date _____
	_____	Date _____

This completed form was reviewed by the \_\_\_\_\_ department and approved for submission to the Curriculum Committee on \_\_\_\_\_  
Date \_\_\_\_\_

**Curriculum Committee vote:** #Yes \_\_\_\_\_ #No \_\_\_\_\_ #Abstained \_\_\_\_\_

Curriculum Chairperson's signature \_\_\_\_\_ Date \_\_\_\_\_

**Action by the Vice President of Instruction:**  Approved  Disapproved

Vice President of Instruction's signature \_\_\_\_\_ Date \_\_\_\_\_

*Please attach a copy of a representative syllabus for this course.*