

# Instructional Evaluation

## Request for Services

Instructor Name: \_\_\_\_\_

Job # : \_\_\_\_\_

Department: \_\_\_\_\_ Course: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

### Job Type:

\_\_\_\_\_ Classroom Test  
\_\_\_\_\_ Classroom Evaluation  
\_\_\_\_\_ Research - Not Paid  
\_\_\_\_\_ Research - Paid  
\_\_\_\_\_ Acct. No.: \_\_\_\_\_  
\_\_\_\_\_ Area and Contracted

### Routing:

\_\_\_\_\_ Hold for Pickup  
\_\_\_\_\_ Campus Mail \_\_\_\_\_  
\_\_\_\_\_ Mailcode: \_\_\_\_\_

### FOR OFFICE USE ONLY:

Name: \_\_\_\_\_ Time: \_\_\_\_\_ Date: \_\_\_\_\_

Received: \_\_\_\_\_

Scanned: \_\_\_\_\_

Analysis: \_\_\_\_\_

Program: \_\_\_\_\_

No. Items: \_\_\_\_\_

No. Files: \_\_\_\_\_

No Sheets: \_\_\_\_\_

### Answer Key Information:

No. Keys: \_\_\_\_\_ No. Questions: \_\_\_\_\_

Omitted Items: \_\_\_\_\_

### Multiple Answers:

Items #: \_\_\_\_\_ Responses: \_\_\_\_\_

Items #: \_\_\_\_\_ Responses: \_\_\_\_\_

Items #: \_\_\_\_\_ Responses: \_\_\_\_\_

Items #: \_\_\_\_\_ Responses: \_\_\_\_\_

### Analysis Desired:

\_\_\_\_\_ Name Roster  
\_\_\_\_\_ Test Statistics  
\_\_\_\_\_ Items Statistics  
\_\_\_\_\_ Item Analysis  
\_\_\_\_\_ Grade Reports

D2L Grades - Please write score name for D2L: \_\_\_\_\_

Additional Instructions: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_