



**Subject Name**

Status  
Employer  
Program  
Rotation  
Evaluation Dates

Evaluated by:

**Evaluator Name**

Status  
Employer  
Program

**On-Demand Peer Review of Teaching**

1\* Instructor:

2\* Lecture Topic:

3\* Date:

4 Please rate the content and delivery of this teaching session in regards to being relevant, engaging, and excellent in educational value with 1 being poor and 10 being excellent .

1	2	3	4	5	6	7	8	9	10
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comment

5 Comments/suggestions for improvement: