PRE-LICENSE EDUCATION  
**SELF-STUDY COURSE EVALUATION**

Provider name        
Course name        
Instructor name        
Date

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Strongly Disagree | Disagree | Not Applicable | Agree | Strongly Agree |
| 1. Information on the provider’s website was helpful. | 1 | 2 | 3 | 4 | 5 |
| 2. The customer service staff promptly answered my questions. | 1 | 2 | 3 | 4 | 5 |
| 3. This course is well prepared. | 1 | 2 | 3 | 4 | 5 |
| 4. The course provides clear information about the insurance terms and concepts. | 1 | 2 | 3 | 4 | 5 |
| 5. Examples used in the course helped me learn the material. | 1 | 2 | 3 | 4 | 5 |
| 6. The course quiz/exam questions were useful to check my knowledge of the material. | 1 | 2 | 3 | 4 | 5 |
| 7. Did you encounter any problems or concerns? | | | | | |
| 8. What changes would you suggest? | | | | | |
| Student name  Student phone number | | | | | |

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