

Student Information

EE474 Health Economics

Semester 1/2014

1. Name _____
2. Nickname _____
3. Email _____ Phone Number _____
4. Year of program: 2nd year 3rd year 4th year
5. Major area (if any) _____
6. Minor area (if any) _____
7. Classes that you have already taken

8. Classes that you are currently taking

9. Classes that you plan to take in the next semester(s) or next academic year(s)

10. What is/are your favorite subject(s)?

11. What do you expect to learn from this class?

12. What is your concern, if any, about being in this class?

13. What would you suggest to enhance your learning experience while taking this class? Is there any teaching technique that other instructors use and you particularly like? If so, please suggest.

14. Briefly describe your career aspiration(s). List the top two choices if there are many.

15. Other comments and/or suggestions.

(Note: All information is to be used for teaching purpose only, and will be kept confidential.)