

# Mount Aloysius College

## Disability Services

### Note Taker Feedback Form

(Evaluation by Student With Accommodation)

Note Taker's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Student with Accommodation: \_\_\_\_\_

We would appreciate your feedback regarding the note taking services provided by our department. Please return this form by the end of the semester.

**\*\*Upon completion, please return or email to:**

<b>Mount Aloysius College</b> <b>Marisa Evans, MA, LPC, NCC, DCC</b> <b>Director of Counseling and Disability Services</b> <b>101 St. Joseph's Hall</b> <b>7373 Admiral Peary Highway</b> <b>Cresson, PA 16630</b>	<b>mevans@mtaloy.edu</b> <b>(814) 886-6336</b>
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Note Taker	Yes	No
My note taker was dependable (good attendance).		
My notes were legible (clear) and organized.		
My note taker emphasized important information in the notes, such as due dates, project deadlines, homework assignments, etc.		
My notes helped me to understand the class lectures or videos.		
My notes were available for me at the end of the day.		
If my note taker was absent, I still received a copy of notes.		
I had no problems with my note taker.		
If I had problems with my note taker, I was able to resolve the issues immediately.		
I do not feel any class information was omitted in my notes.		
I had no problems understanding the notes my note taker took for me.		
I feel that my information and identity remained confidential.		

I would use this note taker again                      YES                      NO

Additional Comments: \_\_\_\_\_