HOME INSPECTION BOARD
Construction Industries Board
2401 NW 23rd Street, Suite 2F, Oklahoma City, Oklahoma 73107
Telephone: (405) 521-6550 Fax: (405) 521-6525
http://ok.gov/cib/

Pre-Licensing or Continuing Education
CERTIFICATE OF COURSE COMPLETION

NOTE TO PROVIDER: Complete form and furnish a copy to student. Retain record of all certificates of completion. Warning: Authenticated forms received without student's name in place may result in adverse action.

NOTE TO STUDENT: Keep this certificate for your records. Do not send the original to the Home Inspection Board. Upon course completion, forward a copy to the Home Inspection Board, Construction Industries Board, 2401 NW 23rd Street, Suite 2F, Oklahoma City, OK 73107. Please complete the course evaluation on the reverse side of this form.

Student's Name (Typed or Printed)	**Telephone**	**License Number**
Address		**Provider Number**
City, State, ZIP		**Board Course Number**
School/Sponsoring Entity		**Course Ending Date**
Course Title		**Number Hours**
Authentication _____ **Coordinator's Signature** **Date**		

(Continued on Reverse Side)

COURSE EVALUATION FORM

Provider Number	Course Number	Instructor
_____	_____	_____

EVALUATE THE COURSE

	EXCELLENT	VERY GOOD	AVERAGE	FAIR	POOR
1. Did the course cover all topics adequately?	1	2	3	4	5
2. Were course materials adequate?	1	2	3	4	5
3. Was the Course well organized?	1	2	3	4	5
4. Were there sufficient examples & illustrations?	1	2	3	4	5
5. Was sufficient time allotted to cover all subjects?	1	2	3	4	5
6. Was the course taught at the level you anticapted?	1	2	3	4	5
7. Were stated learning objectives achieved?	1	2	3	4	5

EVALUATE THE INSTRUCTOR

	EXCELLENT	VERY GOOD	AVERAGE	FAIR	POOR
1. Knowledge of subject matter:	1	2	3	4	5
2. Organization of verbal presentation:	1	2	3	4	5
3. Quality of verbal presentation:	1	2	3	4	5
4. Use of case problems:	1	2	3	4	5
5. Involvement of students in presentation:	1	2	3	4	5
6. Receptiveness to student questions:	1	2	3	4	5
7. Ability to respond to student questions:	1	2	3	4	5
8. Ability to stimulate student participation:	1	2	3	4	5

Would you recommend this school to others? YES:_____ NO:_____

Would you recommend this course to others? YES:_____ NO:_____

Would you recommend this instructor to others? YES:_____ NO:_____