**Classroom Visit Feedback Form – International Foundation Program, Kainan University, Academic Year \_\_\_, Semester \_\_\_**

| **Visit Date (Day of the Week)** | **Class Period Visited** | **Class Time** |
| --- | --- | --- |
|  |  |  |

| **Instructor** | **Classroom** | **Enrollment** | **Attendance** | **Instructor Present** | **Remarks** |
| --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |

**The International Foundation Program is responsible for conducting classroom visits. If any irregularities are observed during a visit, a Classroom Visit Feedback Form will be issued to the instructor. The instructor is requested to provide a written explanation, sign the form, and return it to the International Foundation Program within two days for further processing.**

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| Report on Irregularities Observed During Classroom Visit |
| Irregularities | □ Student attendance below 60%□ No one present in the classroom□ Instructor absent |
| Instructor’s Response | Instructor’s Signature：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| IFP Office Action | Inclusion in Irregularity Records (If included, it will be considered in instructor evaluation)□ Included □ Not Included Department Head: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |