



Yale University
School of Engineering & Applied Science

CEE Special Investigation Evaluation Form

☐ FALL TERM

☐ SPRING TERM

NAME _____ **Date** _____
last first

_____ *home address office phone*

_____ *home phone*

Instructor must submit grade at the Faculty Grade Submission site.

Feedback

Instructor _____
Name Signature

Please email signed form as a PDF to isabel.rinaldi@yale.edu