Please fill out this survey and turn it in to me by Tuesday, September 29. This survey is worth 1% of your final grade.

1. Why are you taking this class?

2. What do you need this class for?

3. Circle what grade you expect to receive in this class.
   F   D-   D   D+   C-   C   C+   B-   B   B+   A-   A   A+

4. Circle your current year in college:
   Freshman  Sophomore  Junior  Senior  Other (explain)

5. Circle the highest-level math class you’ve taken:
   Algebra 1  Geometry  Algebra 2  Precalculus  Calculus  Other (explain)

6. On a scale from 1 through 10, with 1 being "not at all" and 10 "super", circle your confidence in doing mathematics:
   1   2   3   4   5   6   7   8   9   10

7. Write below any comments, questions, or concerns of which you believe I should be aware. If you have none, draw a PG-13 picture.