

STUDENTS FEEDBACK FORM

Department.....

Register No of the student:

We are intended to collect information relating to your satisfaction towards the curriculum, and service provided by this institution. The feedback will be used for quality improvement of the program of studies/institution.

Directions: You are requested to give a number in the box provided against each item as per the followingscale: Above the expectation-3 Satisfactory-2 Need improvement-1

S.No	Parameter	Rating
1	The content of syllabus and the design pattern of each course inrelation to the competencies expected out of the course?	
2	Relation between the units of each course.	
3	Credit allocation of each course.	
4	Offering of Elective courses in terms of relevance to the specialization stream and technological advancement.	
5	Size of the syllabus in terms of load on student.	
6	Relevance of the courses to the laboratory experiments.	
7	Accessibility to select and apply appropriate techniques for innovations.	

Please suggest the following				
1	Any additional course required			
2	Any additional tool required			
Suggestions:				

Signature