P.N. DAS COLLEGE

IQAC

STUDENTS FEED BACK FORM

For	each item	please indicate your leve	el of agreement with the following	ng			
<u>Directions</u> :							
3.	Session	:	Department:				
2.	Class	: B.A./B.Sc./B.Com. (H,	(G) Year: $1^{st}/2^{nd}/3^{rd}$ Year				
1.	Name of the Teacher :						

statement by marking $\sqrt{}$ a score between 1 and 5. A Higher score indicates a stronger agreement with the statement.

A. COURSE CONTENT:

- 1. The teacher covers the entire syllabus
- 2. The teacher discusses topics in detail
- 3. The teacher possesses deep knowledge of the subject taught
- 4. The teacher communicates clearly
- 5. The teacher inspires me by his/her knowledge in the subject

B. TEACHING- LEARNING PROCESS

- 6. The teacher is punctual to the class
- 7. The teacher engages the class for the full duration and completes the course in time
- 8. The teacher comes fully prepared for the class

	Below Avg 1	Avg 2	Good 3	Very Good	Exce llent 5
:					
:					
:					
:					
:					
:					
:					
:					

- 9. The teacher provides guidance counseling in academic and non-academic matters in/out side the class
- 10. The teacher encourages participation and discussion in class (Teacher-Student, Student-Student)
- 11. The teacher encourages and values disagreement
- 12. The teacher uses modern teaching aids/gadgets, handouts, suggestion of references, PPT, web-resources (Any other)
- 13. The teacher pays attention to academically weaker students as well
- 14. The teacher relates the course material with real world situations
- 15. The teacher's attitude toward the students was friendly and helpful

C. EVALUATION PROCESS

- 16. Periodical assessments were conducted as per schedule
- 17. The teacher uses non-traditional methods of evaluation like Quiz, Seminars, Assignments, Class room presentation/participation (Any other)
- 18. Question paper covers all the topics in the Curriculum
- 19. The teacher was fair and unbiased in the evaluation Process
- 20. Overall Rating of the Teacher : In my view the teacher has professional competence and is a role model

:			
:			
:			
:			
:			
:			
:			

:			
:			

21. Additional Remarks (if any):

(Please cut along the dashed line and deposit it separately)
Name of the Student:
Name of the Department:
Name of the Teacher who has been evaluated:
Session: Class: Year: Roll:

Date:

Signature of the Student