

# CHHAJU RAM MEMORIAL JAT COLLEGE, HISAR (HARYANA)

## STUDENT FEEDBACK FORM

**Note:**

- i. This form is to be filled only by students having at least 65% attendance.
- ii. Please do not write your name or roll number on the form
- iii. The information provided by you will be kept confidential and will be used only for student participation in quality enhancement.

Name of the Teacher: \_\_\_\_\_ Subject: \_\_\_\_\_

Class: \_\_\_\_\_ Semester: \_\_\_\_\_ Session: \_\_\_\_\_

Paper Title: \_\_\_\_\_

### Feedback (Curriculum, Teaching, Learning & Evaluation)

**I.** For each of the question, you are required to indicate your opinion by encircling the letter a, b, c or d.

**1. Course Content:**

- |  |                                |
|--|--------------------------------|
| a) Can be covered in one semester                    | c) Not enough for one semester |
| b) Too much to be adequately covered in one semester | d) Difficult to comment        |

**2. Relevance of the course in the overall structure of program**

- |                        |                         |
|------------------------|-------------------------|
| a) Very relevant       | c) Not at all relevant  |
| b) Reasonably relevant | d) Difficult to comment |

**3. Overlap with other courses**

- |                 |                                 |
|-----------------|---------------------------------|
| a) No overlap   | c) Repetition of several topics |
| b) Some overlap | d) Difficult to comment         |

**4. Recommended Reading material was**

- |   |                      |
|---|----------------------|
| a) Adequate and relevant                | c) Mostly inadequate |
| b) To some extent adequate and relevant | d) Cannot comment    |

**5. Class tests/mid-semester tests were conducted**

- |                                       |                                |
|---------------------------------------|--------------------------------|
| a) As per schedule and satisfactorily | c) In an unsatisfactory manner |
| b) Never                              | d) But were inadequate         |

**6. The class tests/mid-term tests were**

- |              |                    |
|--------------|--------------------|
| a) Difficult | c) Balanced        |
| b) Easy      | d) Out of Syllabus |

**II.** Using the rating scale below, please tick that best value that expresses your opinion.  
(1-strongly disagree, 2-disagree, 3-neither agree nor disagree, 4-agree, 5-strongly agree)

		1	2	3	4	5
1.	The teacher completes the entire syllabus in time					
2.	The teacher has subject knowledge					
3.	The teacher communicates clearly and inspires me by his/her teaching					
4.	The teacher is punctual in the class					
5.	The teacher comes well prepared for the class					
6.	The teacher encourages participation and discussion in class					
7.	The teacher uses teaching aids, handouts, gives suitable references, make presentations and conducts seminars/tutorials, etc.					
8.	The teacher's attitude towards students is friendly & helpful					
9.	The teacher is available and accessible in the Department					
10.	The evaluation process is fair and unbiased					

(i) Comments/Suggestions for improvements of Curriculum \_\_\_\_\_

(ii) Comments/Suggestions for the teacher \_\_\_\_\_

(Please use additional sheet, if necessary)