**R B S College, Agra affiliated**

**to**

**DR. B.R. AMBEDKAR UNIVERSITY, AGRA**

**Internal Quality Assurance Cell (IQAC)**

**Students Feed Back Form**

# Academic year………………… Semester…………….. Date of Feedback…………………………..

**Course/Class/Branch ………………………………**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Sl.No.** | **Description** | **Subject Name and Code** | | | | | |
| **(A)** | **Course Contents** |  |  |  |  |  |  |
| 1 | Has the Teacher covered entire Syllabus as prescribed by University?  (Yes/No) |  |  |  |  |  |  |
| 2 | Has the Teacher covered relevant  topics beyond Syllabus (Yes/No) |  |  |  |  |  |  |
| 3 | Effectiveness of Teacher in terms of\* |  |  |  |  |  |  |
| i | Technical content |  |  |  |  |  |  |
| ii | Communication skills |  |  |  |  |  |  |
| iii | Use of Non print teaching aids |  |  |  |  |  |  |
| iv | Availability beyond normal classes and co−operation to solve individual  Problems(Yes/No) |  |  |  |  |  |  |
| v | Pace on which contents were covered\* |  |  |  |  |  |  |
| vi | Overall effectiveness\* |  |  |  |  |  |  |
| 4 | How do you rate the contents of the  curriculum ?\* |  |  |  |  |  |  |
| 5 | How do you rate lab facilities, if  applicable?\* |  |  |  |  |  |  |

**\*(Rating : 5-Excellent, 4-Very Good, 3- Good, 2- Average, 1- Below Average)**

|  |  |  |
| --- | --- | --- |
| 1 | Library Facility\* |  |
| 2 | Internet Facility\* |  |
| 3 | Co−Curricular activities\* |  |
| 4 | Any other suggestions |  |

Name and Signature of the student (Optional) Attendance %....................................................

CGPA %............................................................

Please **e-mail** the completed form to [iquacrbsc@gmail.com](mailto:iquacrbsc@gmail.com)

**OR**

Post it on the following address:

**Coordinator, Internal Quality Assurance Cell (IQAC) ,R B S College, Agra-282004**