

## Dr. Bhimrao Ambedkar University, Agra

### Students Feed Back Form

Academic year..... Semester..... Date of Feedback.....

Course/Class/Branch .....

Sl.No.	Description	Subject Name and Code					
(A)	<b>Course Contents</b>						
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 %.....