

PARENTS FEEDBACK FORM

NAME OF THE STUDENT:	BATCH:	BRANCH:	YEAR:	SEMESTER:		
Name of the Parent : Qualification of the parent : Occupation: Present Postal Address : Pin Code: - Phone No:- Mobile No:- E-mail id:						
Please rate the college for the following parameters given below in a scale of 1 to 4 where 1 is Poor, 2 is Average, 3 is Good and 4 is excellent. (Mark the rating scale using)						
a. Basic aspects						
S.NO	PARAMETERS	POOR	AVERAGE	GOOD	EXCELLENT	RATING
1	Administrative facilitation					
2	Help from college office					
3	Performance of teachers					
4	Practical Knowledge imparted					
5	Quality of Teaching					
6	Lab infrastructure					
7	Industrial Exposure					
8	Placement & Career guidance					
9	Transportation					
10	Canteen					
11	Extra curricular activities					
12	Bank/Post Office					
13	Medical Facilities					
14	Security					
15	Overall exposure					
	Total Score					
b. Curricular aspects:						
1	Curriculum delivery to your ward is satisfied compared to other engineering colleges					
2	After joining the institution, technical knowledge has improved to your ward.					
3	Satisfied with the academic results of our institution.					
4	Library and industry powered centre facilities for the courses are more than adequate in our Institution.					
5	Assessment pattern is satisfied for your wards					

2. Does your ward regularly inform you about his/her Performance? : Yes/No
3. Did you receive any complaints about your ward from the institution? : Yes/No
4. Whether you are getting information about your ward from the Institution: Yes/No
5. Your suggestions :

Signature of the Parent