

Sameer Gandhi Kala Mahavidhyalaya, Malshiras

INFORMATION OF THE STUDENT

1. NAME OF THE STUDENT (MENTEE) Mr. /Ms. : _____
2. Date of Birth: _____
3. Class: _____
4. Roll no.: _____
5. Marks of Previous Exam In % : _____
6. Name of the Father: _____
7. Father's Education /Occupation : _____
8. Name of the mother: _____
9. Mother s Education /Occupation: _____
10. Cotact no. of Parents : _____
11. Perment Address: _____

Pin Code : _____

Mo. No.- _____

12. Parents Monthl Income: _____
13. Number of Brother: _____

(whether sending in the same college): (yes / no.)

14. Number of Sister : _____

(Whether Sending in the Same College): (yes / no.)

15. Personal :
 - A) Mark of Identification: _____
 - B)Blood Group : _____ C) Hight(cms): _____
 - D)Weight : _____
 - E) Allergy/ Illness if any : _____

16. Name of the Mentor: _____

Sign of the Parents

Sign of Student

Sign of in Charge Teacher

STUDENT FEEDBACK ON INSTITUTION AND COURSE

Sameer Gandhi Kala Mahavidhyalaya, Malshiras

Name:

ADDRESS:

CLASS:

EMAIL ID :

CONTACT NO.

4.00	3.00	2.00	1.50 0.0
A	B	C	D
VERY GOOD	GOOD	SATISFACTORY	UNSATISFACTORY

SR. NO.	PARAMETER	A VERY GOOD	B GOOD	C SATISFACTORY	D UNSATISFACTORY
01.	REPITITION OF THE INSTITUTE IN THIS LOCALITY				
02.	Educational ATMOSPHERE OF THE INSTITUTION				
03.	RELEVANCE OF THE COURSE IN PRESENT SCENARIO				
04.	EDUCATIONAL NEEDS OF THE STUDENTS ARE SATISFIED BY THE INSTITUTION				
05.	APPLICABILITY OTHE COURSE OUT SIDE WORLD				
06.	COMPLETION OF THE COURE IN TIME				
07.	DEVELOPMENT OF YOUR WARD AFTER COMLITION OF THE COURSE				

PARENTS FEEDBACK ON INSTITUTION AND COURSE

Sameer Gandhi Kala Mahavidhyalaya, Malshiras

Name:

ADDRESS:

CONTACT NO.:

4.00	3.00	2.00	1.50 0.0
A	B	C	D
VERY GOOD	GOOD	SATISFACTORY	UNSATISFACTORY

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Sameer Gandhi Kala Mahavidyalaya, Malshiras

FEEDBACK FORM : YEAR : 201 - 201

CLASS:

SEMESTER:

TEACHERS EVALUTION FORM

Dear students, for the general academic improvement of the college, your sincere feedback is required .Please give credit from 1 To 4 in the table no. 3 as per the scheme shown in table no. 2

NAME OF THE STUDENT: _____

ROLL NO. _____ MO. NO. _____

TABLE NO .0 1

TABLE NO.2

PAPER NO.	NAME OF THE PAPER	NAME OF THE TEACHER

YOUR IMPRESSION	CREDIT POINTS
EXEELLENT	4
GOOD	3
AVERAGE	2
POOR	1

TABLE NO. 03

SR.NO.	QUESTIONS TO BE ANSWER BY WRITING RESPONSES 4/3/2/1	CREDIT POINTS 1 TO 4 FOR EACH OF THE PAPER					
		PAPER NO.	PAPER NO.	PAPER NO.	PAPER NO.	PAPER NO.	PAPER NO.
01.	LECTURES CONDUCTED						
02.	SYLLABUS COVERED						
03.	WERE THE LECTURES TAKEN AS PER THE TIME TABLE ?						
04.	WERE THE LECURES WELL PREPARED & WELL ORGANIZED ?						
05.	WAS THE BLACK THE BOARD WRITING CLEAR & WELL ORGANIZED ?						
06.	WAS THE INFORMATION & COMUNICATION TECHNOLOGY (ICT) USED ?						
07.	WERE THE FUNDAMENTAL CONCEPTS REVISED & ILLUSTRATED WITH ENOUGH EXAMPLES ?						
08.	DID THE TEACHER PROVED YOU NEW KNOWLEDGE & HAD COMMEND OVER THE SUBJECT ?						
09.	DID THE TEACHER ENCOURAGE YOU TO ASK QUESTION & MADE LECTURES INTERACTIVE & LIVE ?						
10.	WAS THE TEACHER ABLE TO DELIVAR LECTURES WITH GOOD COMMUNICATION SKILL ?						
11.	WAS THE TEACHER ENTHUSIASTIC ABOUT THE TEACHING ?						
12.	DID THE TEACHER IMPROVE YOUR UNDERSTANDING OF THE CONCEPTS & MOTIVATED YOU TO THINK & LEARN ?						
13.	WERE THE ASSIGNMENT PROBLEMS & TESTS CHALLENGING &						
14.	WAS THE EVALUTION FAIR & IMPARTIAL ? DID IT HELP TO IMPROVE ?						
15.	WAS THE TEACHER ACCESSIBLE TO YOU FOR GUIDENCE & SOLVING DIFFCULTIES OUT OF THE CLASSROOM HOURES ?						
	TOTAL SCORE (OUT OF 60)						

- (1) WHAT ARE THE THINKS THAT YOU LIKE ABOUTE THE DEPARTMENT ?
- (2) WHAT ARE YOUR SUGGESTIONS & EXPECTATIONS FOR THE OVER ALL IMPROVEMENT

FEEDBACK FORM : YEAR – 201 - 201

CLASS -

SEMESTER –

COLLEGE EVALUTION FORM

DEARE STUDETS, FOR THE GENERAL IMPROVEMENT OF THE COLLEGE, YOUR SINCERE FEEDBACK IS REQUIRED, PLEASE TICK MARK () AT THE APPROPRIATE ANSWER OF THE FOLLOWING QUESTIONS .

SR. NO.	QUESTIONS TO BE ANSWERED	NOT SATICEFACTORY	SATICEFACTORY	GOOD	VERY GOOD
1.	Performance of subject teachers				
2.	Rules & regulations of the college				
3.	Fees structure				
4.	College campus				
5.	Library environment				
6.	Quantity of syllabus & reference books in the Library				
7.	Laboratory facility (equipments , chemicals, furniture , software etc.)				
8.	Quality of practical work conducted				
9.	Internet facility				
10.	Activities conducted & facilities provided by the career guidance & placement cell				
11.	Canteen facility				
12.	Girls /Boys room facility				
13.	Drinking water facility				
14.	Toilet facility				
15.	Anti Raging cell				
16.	Parking facility				
17.	Sorts activities conducted by the college				
18.	Cultural activities conducted by the college				
19.	Infrastructure of college				

Signature

Name of the student. _____

Mob. No. _____

Class. _____

Year. _____