

UNIVERSITY OF MADRAS
STUDENTS FEED BACK FORM

1. Name of the Teacher :	Course Code :
2. Class :	Course Title :
3. Semester : I / II / III / IV / V / VI	Department :

Directions:

For each item please indicate your level of agreement with the following statement by choosing a score between 1 and 5. A Higher score indicates a stronger agreement with the statement.

A. COURSE CONTENT:

1 2 3 4 5

- | | | | | | | |
|--|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 1. The teacher covers the entire syllabus | : | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. The teacher discusses topics in detail | : | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. The teacher possesses deep knowledge of the subject taught | : | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. The teacher communicates clearly | : | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. The teacher inspires me by his/her knowledge in the subject | : | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

B. TEACHING- LEARNING PROCESS

- | | | | | | | |
|--|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 6. The teacher is punctual to the class | : | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. The teacher engages the class for the full duration and completes the course in time | : | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. The teacher comes fully prepared for the class | : | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. The teacher provides guidance counseling in academic and non-academic matters in/out side the class | : | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

10. The teacher encourages participation and discussion in class (Teacher-Student, Student-Student) :
11. The teacher encourages and values disagreement :
12. The teacher uses modern teaching aids/gadgets, handouts, suggestion of references, PPT, web-resources (Any other) :
13. The teacher pays attention to academically weaker students as well :
14. The teacher relates the course material with real world situations :
15. The teacher's attitude toward the students was friendly and helpful :

C. EVALUATION PROCESS

16. Periodical assessments were conducted as per schedule :
17. The teacher uses non-traditional methods of evaluation like Quiz, Seminars, Assignments, Class room presentation/participation (Any other) :
18. Question paper covers all the topics in the Curriculum :
19. The teacher was fair and unbiased in the evaluation Process :
20. Overall Rating of the Teacher :
In my view the teacher has professional competence and is a role model :



UNIVERSITY OF MADRAS

STUDENTS FEED BACK FORM ON ADMINISTRATION

LIBRARY

- | | |
|---|----------------------------|
| 1. How often do you visit the Library | Regular/Occasionally/Never |
| 2. Are the required number of titles in your Subject available in the Library | Yes / No |
| 3. Are you satisfied with the cataloguing and arrangement of books in the Library | Yes / No |
| 4. Are you satisfied with the available Reading space in the Library | Yes / No |
| 5. Are the Library Staff co-operative and helpful | Yes / No |
| 6. Are you able make use of Xerox facility in the Library | Yes / No |

INTERNET CENTRE

- | | |
|--|----------|
| 7. Are you able to access Internet Centre as and when you require | Yes / No |
| 8. Are you making use of educational online resources | Yes / No |
| 9. Are there enough number of nodes Available in the Internet Centre | Yes / No |
| 10. Are the Net centre staff co-operative and helpful | Yes / No |

ADMINISTRATION

- | | |
|--|----------|
| 11. Is the Departmental office helpful in administrative matters | Yes / No |
| 12. Do you receive the Mark statements in time | Yes / No |
| 13. Are there enough clean class rooms available in the Department | Yes / No |
| 14. Are the toilets cleaned properly | Yes / No |
| 15. Are you provided with enough drinking water | Yes / No |
| 16. Are you happy with the food served in the present canteen | Yes / No |
| 17. As there a Student Amenity Centre in your Campus | Yes / No |
| 18. How far is the USAB helpful to you | Yes / No |
| 19. Are you making use of Green Box Services in our University | Yes / No |
| 20. Do you think that your grievances are Redressed when Green box is used | Yes / No |
| 21. Are you aware of the functioning of a placement cell in our University | Yes / No |
| 22. Are the Lab. Equipments is proper working conditions | Yes / No |
| 23. Are you provided with adequate quantity of chemicals and specimen for carrying out Lab. activities | Yes / No |
| 24. Are you aware of the "Earn While you Learn" Scheme in our University | Yes / No |
| 25. Do you avail any Scholarship from the University | Yes / No |
| 26. Are you a beneficiary of Free Education Scheme of our University | Yes / No |