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[**Madhav**](http://www.slbsrsv.ac.in/) **Vidhi Mahavidyalaya**

**Vivekanand Marg, RajwadeParisar, NaiSadak, Lashkar, Gwalior - 474001**

**Student Feedback Form for the Academic Year ---------**

**(Filledfeedback form, sendto**iqac@mvmcbe.org**)**

Name: .......................................................Course: .......................... Department:........................................

Years/Semester: (-------) I / II / III / IVAddress.......................................................................................

Mobile .................................................... E-mail .........................................................................................

1. How much of the syllabus was taught in class?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1). 90 to 100% | 2).75 to 90% | 3) 50 to 75% | 4) 40 to 50% | 5) less than 40% |  |  |

1. What is your opinion about the library holdings for the course?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1) excellent | 2) adequate | 3) inadequate | 4) poor | 5) very poor |  |  |

1. Were you able to get the prescribed readings?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1) very good | 2) good | 3) average | 4) poor | 5) very poor |  |  |

1. The internal evaluation system as it exists is

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1) very good | 2) good | 3) average | 4) poor | 5) very poor |  |  |

1. When you meet students who have taken a similar programme at other Universities do you feel that your programme is ?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1) superior | 2) equal | 3) inferior |  |  |

1. How do you rate the student-teacher relationship in the institution as a whole?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1) very good | 2) good | 3) satisfactory | 4) unsatisfactory | 5) very poor |  |  |

1. How do you rate the student-teacher relationship in your department?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1) very good | 2) good | 3) satisfactory | 4) unsatisfactory | 5) very poor |  |  |

1. How do you find the Madhav Vidhi Mahavidyalaya administrative offices?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1) very helpful | 2) helpful | 3) indifferent | 4) unhelpful | 5) cumbersome |  |  |

1. How do you rate the health care facilities?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1) very good | 2) good | 3) average | 4) poor | 5) very poor |  |  |

1. Did you participate in any of the extra curricular activities of the Department?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1) very often | 2) often | 3) sometimes | 4) rarely | 5) never |  |  |

1. What was the attitude of teachers to extra curricular activities?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1) co-operative | 2) indifferent | 3) discouraging |  |  |

1. Has your time at the Madhav Vidhi Mahavidyalaya been intellectually enriching?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1) yes | 2) marginally | 3) no |  |  |

1. After leaving the Madhav Vidhi Mahavidyalaya how will you talk about it?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1) proudly | 2) indifferently | 3) disparagingly |  |  |

1. Overall Rating of the Programme [tick (🗸) in the relevant cell]

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Sl #** | **Item** | **Very good** | **Good** | **Average** | **Poor** | **Very poor** |
| 1 | Academic content |  |  |  |  |  |
| 2 | Fairness of evaluation |  |  |  |  |  |
| 3 | Interaction with faculty |  |  |  |  |  |
| 4 | Interaction with administration |  |  |  |  |  |
| 5 | Library facilities |  |  |  |  |  |
| 6 | Computer facilities |  |  |  |  |  |
| 7 | Recreational facilities |  |  |  |  |  |
| 8 | Extra-curricular activities |  |  |  |  |  |
| 9 | Sports facilities |  |  |  |  |  |

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**Questionnaire - 2**

Student Feedback on Teachers (Separate for each Teacher)

**( Filled feedback form, send to**iqac@mvmcbe.org**)**

Name of the Student:-----------------------------------------------------------------Sex (M/F): ---------------------

Department: ------------------------------Year of Superannuation: -------------- E-mail --------------------------

Address: ------------------------------------------------------------- mobile ..------------------------------------------

Students are required to rate the courses on the following attributes using the 4 -point scale shown.



Name of the Teacher: ---------------------------------------------------------------

[Tick (🗸) in the relevant cell]

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Parameters | AVery Good | BGood | CSatisfactory | DUnsatisfactory |
| 1. Knowledge base of the teacher (as perceived

by you) |  |  |  |  |
| 1. Communication Skills (in terms of articulationand comprehensibility)
 |  |  |  |  |
| 1. Sincerity / Commitment of the teacher
 |  |  |  |  |
| 1. Interest generated by the teacher
 |  |  |  |  |
| 1. Ability to integrate course material withenvironment/other issues, to provide a broader perspective
 |  |  |  |  |
| 1. Ability to integrate content with othercourses
 |  |  |  |  |
| 1. Accessibility of the teacher in and out of the class (includes availability of the teacher tomotivate further study and discussion outside class)
 |  |  |  |  |
| 1. Ability to design quizzes /tests/assignments /

examinations and projects to evaluatestudents understanding of thecourse |  |  |  |  |
| 1. Provision of sufficient time for feedback
 |  |  |  |  |
| 1. Overall rating
 |  |  |  |  |

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**Questionnaire - 3**

Students’ overall Evaluation of Programme and Teaching

[To be filled only after Results are out]

**(Filled feedback form, send to**iqac@mvmcbe.org**)**

Name of the Student: Mr/Ms/Mrs ------------------------------------------------------Year ----------------------

Department: ------------------------------------ Teacher: --------------------------- Course: -------------------

Address: ----------------------------------------------------- mobile ------------------- E-mail ---------------------

• Your responses will be seen only after your course results have been finalised and recorded.

• The information will be used only for the improvement of the course and teaching in the future.

• You need not disclose your name if you do not wish to.

• You may write your option as a, b, c or d in given blank box.

|  |  |  |
| --- | --- | --- |
| 1. How much of the syllabus was covered in class? |  |  |
| a) 85 to 100% | b) 70 to 85% | c) 55 to 70% | d) less than 55% |  |  |
| 2. What is your opinion about the library materials for the course? |  |  |
| a) excellent | b) adequate | c) inadequate | d) very poor |  |  |
| 3. Were you able to get the prescribed readings? |  |  |
| a) easily | b) with some difficulty | c) with a great difficulty | d) not at all |  |  |
| 4. How well did the teacher prepare for class? |  |  |
| a) thoroughly | b) satisfactorily | c) poorly | d) not at all |  |  |
| 5. How well was the teacher able to communicate? |  |  |
| a) effectively | b) invariably | c) satisfactorily | d) badly |  |  |
| 6. Did the teacher encourage student participation in class? |  |  |
| a) Always | b) so often | c) sometimes | d) rarely |  |  |
| 7. If the teacher encourage student participation in class, which of the following Methods were used? |  |  |
| a) encouraged questions | b) discussion in class | c) discussion outside class | d) discussion individually |  |  |
| 8. How helpful was the teacher in advising? |
| a) always helpful | b) often helpful | c) sometimes helpful | d) unhelpful |  |  |
| 9. Was the teacher |
| a) courteous | b) strict | c) indifferent | d) rude |  |  |
| 10. Did the internal assessment work? |
| a) fairly | b) regularly | c) helpfully | d) cannot say |  |  |
| 11. What effect do you think the internal assessment will have on your course grade? |
| a) improve it | b) lower it | c) no effect | d) cannot say |  |  |
| 12. How did the teacher provide feedback on your performance? |
| a) regularly/in time  | b) irregularly /late | c) with helpful comments | d) without comments |  |  |
| 13. Were your assignments discussed with you? |
| a) yes, fully | b) yes, partly | c) sometimes | d) no |  |  |
| 14. Was there any opportunity for personal interaction with teachers? |
| a) Yes | b) to some extent | c) no | d) can’t say |  |  |
| 15. Were you provided with a course and lecture outline at the beginning? |
| a) Yes | b) to some extent | c) no | d) can’t say |  |  |
| 16. Was it helpful? |
| a) Yes | b) to some extent | c) no | d) can’t say |  |  |
| 17. Was it followed? |
| a) Yes | b) to some extent | c) no | d) can’t say |  |  |
| 18. Were outsider experts invited to address you? |
| a) Yes | b) frequently | c) rarely | d) none |  |  |
| 19. If you have other comments to offer on the course and the instructor you may do so below or on a separate sheet.------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------ |

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**Questionnaire – 4**

**Students Feed Back Form on Administration**

**(Filled feedback form, send to**iqac@mvmcbe.org**)**

Name of the Student: Mr/Ms/Mrs -------------------------------------------------------Year --------------------------Department: ------------------------------------ Teacher: ------------------------------- Course: ---------------------

Address: ----------------------------------------------------- mobile ------------------- E-mail -----------------------

**LIBRARY**[tick (🗸) in the relevant cell]

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. How often do you visit the Library
 | Regular |  | Occasionally |  |
| 1. Are the required number of titles in your Subject available in the Library
 | Yes |  | No |  |
| 1. Are you satisfied with the cataloguing and arrangement of books in the Library
 | Yes |  | No |  |
| 1. Are you satisfied with the available Reading space in the Library
 | Yes |  | No |  |
| 1. Are the Library Staff co-operative and helpful
 | Yes |  | No |  |
| 1. Are you able make use of Xerox facility in the Library
 | Yes |  | No |  |

**INTERNET CENTRE**[tick (🗸) in the relevant cell]

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. Are you able to access Internet Centre as and when you require
 | Yes |  | No |  |
| 1. Are you making use of educational online resources
 | Yes |  | No |  |
| 1. Are there enough number of nodes Available in the Internet Centre
 | Yes |  | No |  |
| 1. Are the Net centre staff co-operative and helpful
 | Yes |  | No |  |

**ADMINISTRATION**[tick (🗸) in the relevant cell]

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. Is the Departmental office helpful in administrative matters
 | Yes |  | No |  |
| 1. Do you receive the Mark statements in time
 | Yes |  | No |  |
| 1. Are there enough clean class rooms available in the Department
 | Yes |  | No |  |
| 1. Are the toilets cleaned properly
 | Yes |  | No |  |
| 1. Are you provided with enough drinking water
 | Yes |  | No |  |
| 1. Is there a Student Amenity Centre in your Campus
 | Yes |  | No |  |
| 1. Are you making use of social Services in our University
 | Yes |  | No |  |
| 1. Do you think that your grievances are Redressed when Green box is used
 | Yes |  | No |  |
| 1. Are you aware of the “NCC and NSS” Activities in our University
 | Yes |  | No |  |
| 1. Do you avail any Scholarship from the University
 | Yes |  | No |  |