



FACULTY FEEDBACK FORM

Academic Session: _____ - _____

Date: _____

OBJECTIVE OF THE FEEDBACK

The RTMNU syllabus and COA guidelines allows the Institute relative freedom in framing the contents of a wide range of courses. This enables the Institute to seek innovative methods in teaching-learning by which it can achieve its mission. The Institute values your feedback to strive for its overall betterment.

Faculty profile -

Name of the faculty- _____

Designation - _____ Department _____

Email address - _____

Names of Course taught by you in the last semester:

C1. _____ C2. _____

C3. _____ C4. _____

C5. _____ C6. _____

Rate the course content framed by the University: Excellent

Response	C1	C2	C3	C4	C5	C6	Notes:
a. Good							
b. Average							
c. Below Average							

Have you prevailed the academic flexibility granted by the University for the courses taught by you?

Response	C1	C2	C3	C4	C5	C6	Notes:
a. No							
b. Slightly							
c. Moderately							
d. Extensively							

By what means have you prevailed the academic flexibility in association with the Institute for the courses taught by you?

Response	C1	C2	C3	C4	C5	C6	Notes:
a. By adding relevant content							
b. By increasing field exposure							
c. By increasing hands on experience							
d. By interlinking of courses							

Rate the attainment level of the Course Outcome of the courses taught by you:

Response	C1	C2	C3	C4	C5	C6	Notes:
a. Excellent							
b. Good							
c. Average							
d. Below Average							



If the course is not satisfying Course Outcome, give suggestions for syllabus re framing (Mention Course Name first)

Suggest any value addition to Institute for better Teaching – Learning Process

Any Other Suggestions:

Signature of Faculty

Signature & Name of Authority

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