

BIJNI COLLEGE:BIJNI

ESTD: 1969

BIjni, Chirang (BTAD), Assam, India

STUDENT FEEDBACK FORM

Select any option

Dear Students,

Feedback from students is very crucial for improving the working of the college, and hence we request you to fill this form to the best of your knowledge.

Name of the course/ Department: -----
Semester and Year:-----
Name Student:-----
Students Roll Number:-----
Mobile Number:-----
Email Id:-----

Please Tick the appropriate box of your response:

[E] Excellent [VG] Very Good [G] Good
[A] Average [NI] Need Improvement

Parameters	E	VG	G	A	NI
[1] Syllabi has applicability/ relevance to Current Global scenarios.					
[2] Teacher covers the entire syllabus in Time.					
[3] Online class facilities.					
[4] Classrooms are clean and well Maintained.					
[5] Teacher conducts tests or assignments or Quizzes or seminars or presentations in the class.					
[6] Classrooms are clean and we Maintained.					
[7] Equipment in the laboratories is in good Working condition.					
[8] Computer, internet and wifi facilities.					
[9] Toilets/ washrooms are clean and Properly maintained.					
[10] Library facilities.					

Date:

Signature of student

BIJNI COLLEGE: BIJNI
INTERNAL QUALITY ASSURANCE CELL

TEACHERS FEEDBACK FORM

Faculty:-----

Department:-----

Name of the Faculty Member:-----

You are requested to give your frank opinion by ticking the appropriate choice:

- [E] Excellent, [VG] Very Good, [G] Good
[A] Average, [NI] Need Improvement

Parameters	E	VG	G	A	NI
[1] Content of the course fulfill the Need of the stakeholders.					
[2] The course content is well supported by relevant reference and book materials.					
[3] Syllabi has applicability /relevance to current Global Scenarios.					
[4] Institute provides adequate for Project and research facilities.					
[5] General cleanliness of the college					

Date:

Signature of Faculty

BIJNI COLLEGE: BIJNI
INTERNAL QUALITY ASSURANCE CELL

ALUMINI FEEDBACK FORM

Name:-----
Address:-----
Year of passing:-----
Degree studied:-----
Mobile Number:-----

Please touch the appropriate box of your response

Parameters	Yes	No
[1] Have you seen any change in the college since Passing out?		
[2] Has there been positive change since last NAAC Reaccreditation?		
[3] Did you feel that hospitality of institute after passing Was nice?		
[4] Are you satisfied with the present Functioning of the College?		
[5] Did you feel that the college campus was clean?		

Date:

Signature of alumnus