



TM

BASUNDHARA TEACHERS' TRAINING COLLEGE (A UNIT OF NORTH BIHAR EDUCATIONAL TRUST)

RECOGNISED BY NCTE-ERC, BHUBANESHWAR
AFFILIATED B.R.A BIHAR UNIVERSITY, MUZAFFARPUR
DR. U.S. ROY KNOWLEDGE PARK, SILOUT (NEAR MARKAN CHOWK) N.H. 28,
MUZAFFARPUR (BIHAR) PIN-843119

STUDENTS FEEDBACK ON CURRICULUM

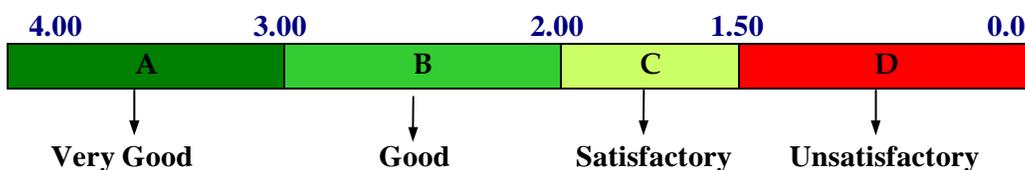
Student Name :

Roll No. :

Department : Education (B.Ed.) - Ist Year

Year : 2022

Students are required to rate the courses on the following attributes using the 4 -point scale shown. The format given is for one course. Do the same for other courses on separate page.



Course-C-001

Parameters	A Very Good	B Good	C Satisfactory	D Unsatisfactory
1. Depth of the course content including project work if any				
2. Extent of coverage of course				
3. Applicability/relevance to real life situations				
4. Learning value (in terms of knowledge, concepts, manual skills, analytical abilities and broadening perspectives)				
5. Clarity and relevance of textual reading material				
6. Relevance of additional source material (Library)				
7. Extent of effort required by students				
8. Overall rating				

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FEEDBACK FROM STUDENTS ON CURRICULUM

Student Name :

Roll No. :

Department : Education (B.Ed.) –IInd Year

Year : 2022

Students are required to rate the courses on the following attributes using the 4 -point scale shown. The format given is for one course. Do the same for other courses on separate page.



Course-08

Parameters	A Very Good	B Good	C Satisfactory	D Unsatisfactory
1. Depth of the course content including project work if any				
2. Extent of coverage of course				
3. Applicability/relevance to real life situations				
4. Learning value (in terms of knowledge, concepts, manual skills, analytical abilities and broadening perspectives)				
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6. Relevance of additional source material (Library)				
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Student Feedback on Teachers (Separate for each Teacher)

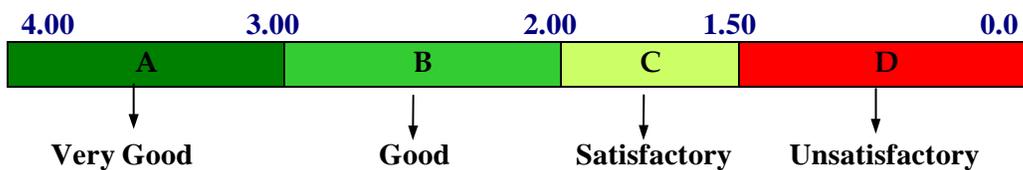
Student Name :

Roll No. :

Department : Education (B.Ed.) - IInd Year

Year : 2022

Please rate the teacher on the following attributes using the 4 -point scale shown



Name of the Teacher :

Parameters	A Very Good	B Good	C Satisfactory	D Unsatisfactory
1. Knowledge base of the teacher (as perceived by you)				
2. Communication Skills (in terms of articulation and comprehensibility)				
3. Sincerity / Commitment of the teacher				
4. Interest generated by the teacher				
5. Ability to integrate course material with environment/other issues, to provide a broader perspective				
6. Ability to integrate content with other courses				
7. Accessibility of the teacher in and out of the class (includes availability of the teacher to motivate further study and discussion outside class)				
8. Ability to design quizzes /Tests /assignments / examinations and projects to evaluate students understanding of the course				
9. Provision of sufficient time for feedback				
10. Overall rating				

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Student Feedback on Teachers (Separate for each Teacher)

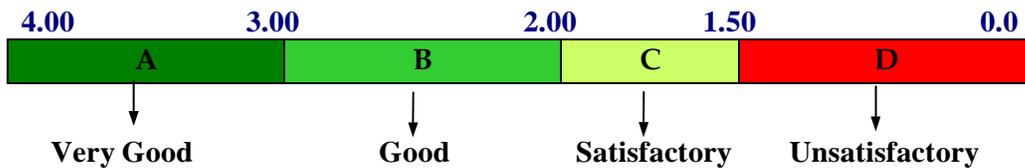
Student Name:

Roll No.:

Department: Education (B.Ed.) - Ist Year

Year: 2022

Please rate the teacher on the following attributes using the 4 -point scale shown



Name of the Teacher:

Parameters	A Very Good	B Good	C Satisfactory	D Unsatisfactory
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Students' overall Evaluation of Programme and Teaching

(To be filled only after Results are out)

Department :

Course :

Pupil Teacher Name:

Year : 2021-23

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 tick off more than one answer to a question to the extent that it does not invalidate your response.

1. The syllabus was
 - a) challenging
 - b) dull
 - c) adequate
 - d) inadequate
2. Your background for benefiting from the course was
 - a) more than adequate
 - b) just adequate
 - c) inadequate
 - d) cannot say
3. Was the course conceptually difficult to understand?
 - a) easy
 - b) manageable
 - c) difficult
 - d) very difficult
4. 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%
5. What is your opinion about the library materials for the course?
 - a) excellent
 - b) adequate
 - c) inadequate
 - d) very poor
6. Were you able to get the prescribed readings?
 - a) easily
 - b) with difficulty

- a) yes, fully
- b) yes, partly
- c) no
- d) sometimes

17. Were you provided with a course and lecture outline at the beginning?

- a) yes
- b) no

18. Was it helpful?

- a) yes
- b) no

19. Was it followed?

- a) yes
- b) no

20. Was there any opportunity for personal interaction with teachers?

- a) Yes
- b) to some extent
- c) nil
- d) cannot say

21. Was there any opportunity for small group work?

- a) Yes
- b) to some extent
- c) nil
- d) cannot say

22. Were outsider experts invited to address you?

- a) Yes
- b) rarely
- c) none
- d) frequently

23. Did you visit industries, laboratories, banks and outside Universities/

- a) Yes, frequently
- b) some times
- c) no
- d) yes, rarely

24. 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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ALUMNI FEEDBACK FORM

Alumni Registration No. :

Name of Alumni :

Residence Address :

.....

Office Address :

Phone No. :

E-mail :

Feedback:

Si. No	Parameter	Excellent	Very Good	Good	Average
01.	Academic Ambience				
02.	Infra Facilities				
03	Library				
04.	Faculty				
05.	Teaching Learning Methods				
06.	Placement Assistance				
07.	Extracurricular & Co-curricular activities				
08.	Counselling				

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Employer's Feedback on Institution & Curriculum

Dear Sir, We are Thankful to you for providing many of our graduates with employment in our prestigious Organization. We shall very much appreciate and be grateful to you if you could spare some of your valuable time to fill up this feedback form. It will help us to improve the Institution further and give you best employees in future.

Respondent Name :..... **Designation** :

Session :..... **Date**

Signature.....

Fill the number that best describes your level of satisfaction at each question:

(a) Very Good-4 (b) Good-3 (c) Satisfactory-2 (d) Unsatisfactory-1

(A) Do you find lacking in any of the following soft skills?

Sl. No.	Parameter	Very good	Good	Satisfactory	Unsatisfactory
1.	Writing Skill				
2.	Teamwork for Institutional Development				
3.	Using Information				
4.	Reading/ Learning Material				
5.	Problem Solving Method				
6.	Developing practical solution to work place problems				
7.	Leadership/Managerial potential				
8.	Interpersonal Skills				
9.	Relevance of the syllabus to their students skill developments				
10.	Decision Making Skills				
11.	Involvement in social/ co-curricular activities				
12.	Critical or Analytical Thinking				
13.	Communication Skills				
14.	Creative in response to workplace challenges				

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Feedback / Suggestion from Parents

Brief Parents Information :

1. Full Name : _____
2. Designation/Occupation : _____
3. Address : _____

Fill in the box with the number given below :

- | | |
|--|--------------------------|
| 1) Curricular | <input type="checkbox"/> |
| 2) Infrastructure | <input type="checkbox"/> |
| 3) Fee Structure | <input type="checkbox"/> |
| 4) Teacher-Student relation | <input type="checkbox"/> |
| 5) Non-Teaching/Staff-Student relation | <input type="checkbox"/> |
| 6) Extra-curricular activity | <input type="checkbox"/> |
| 7) Financial aid (fee freeship etc.) | <input type="checkbox"/> |

5-Excellent 4-Very Good 3 – Good 2- Fair 1-Bad

Suggestion if any :

Signature of the Parent/Guardian :.....

Name of Student :.....

Dept. & Year of student :

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LESSON OBSERVATION/ FEEDBACK

Pupil Teacher's Name:	Date:
Period:	Class:
Lesson Topic:	Section:

Sl.No.	Observation Elements	Observation Notes
1.	Planning & Preparation	
2.	Objectives of the lesson	
3.	Teaching aids	
4.	Teaching Techniques	
5.	Class Management\ Discipline	
6.	Classroom Environment	
7.	Timing	
8.	Pupils Participation	
9.	Language Competency	
10.	Assessment & Evaluation	
11.	Record Keeping	

General Remarks:

Mentee/
Teacher/Mentor

The Visitor's Name & Signature

Principal