Students' Feedback Form

1. Programme of Study	□ UG
•	□ UG☑ Masters□ M.Phil.□ Ph.D.
2. Faculty of Study	 □ Science □ Social Sciences □ Arts □ Education □ Management Studies □ Music and Fine Arts □ Commerce □ Interdisciplinary □ Mathematical Sciences □ Law
3. Name of the Department	Department of Continuing Education
4. Semester of Study	Department of Continuing Education & I II
5. Do you agree to sharing your phone number with the National Assessment and	= 26) one (1
Accreditation Council (NAAC) regarding your Teaching – Learning experience in the university?	9871056653 (Yes)
6. Mention your phone number if you said "Yes" to the question stated above?	19871056653
7. Residence	☐ Hostel ☐ PG/Rented ☑ Local ☐ NCR ☐ Other
8. Gender	□ Female□ Male□ Others
9. Category	☐ General ☐ OBC ☐ SC ☐ ST ☐ EWS ☐ PwD ☐ Other

10. Academic

For each question of statement please give your level of experience by putting one tick against the statement. A higher score indicates a better experience

		of feffec					
	Below Average	Average	Good	Very Good	Excellent	Don't Know	Not Applica ble
Content of Syllabi of thecourses	0	0	0	0	0		
Experiencewithextend and delivery of syllabuscoveredintheclass	0	0	0	0	0	0	0
Use of teachingaids and ICT intheclasstofacilitateteaching	0	0	0	0	0	0	0
ExperiencewithInternalassessment	0	0	0/	0	0	0	0
Student Teacher Interaction	0	0	0	0/	0	\circ	
Use of non-traditionalmethods of evaluationlikequiz,assignments,seminar,presentati onetc	0	0	0	o ⁄	0	0	0
Integrationoftheory and practical classes	0	0	0	0	0	0	0
Stimulationforinnovativethinking	0	0	0	0	0	0	0
OverallsLearningexperience	0	0	0	0	0	0	0
Conditionof Lab Equipment	0/	0	0	0	0	0	0
AvailabilityofOnlineresources	0/	0	0	0	0	0	0
ResearchfacilitiesintheDepartmentforresearchproj				J	O	0	O
ects//M. Phill. //Ph.D.	0	0	0	0	0	0	0
Opportunitytoparticipateinseminar//workshop//conference	0	0	8	0	0	0	0
Experiencewithresearchguidance	0	0	0	0	0	0	0
Participationincoacademic and culturalevents	0	0	0	~	0	0	0

11. Infrastructure

For each question of statement please give your level of experience by putting one tick against the statement. A higher score indicates a better experience.

Classes B. W.	Below Average	Average	Good	Very Good	Excellent	Don't Know	Not Applica
ClassroomFacilities (LCD//Audio/Computeretc)	0	0	0	0	0	0	ble
Food Outlets/Canteens	0/	0	0	0	0	0	0
LibraryReading Room Facility	0	0	0/	0	0	0	O
Librarydigitalresources and readingmaterialsupport	0	0	8	0	-		0
InternetFacility	0	0	0	-	0	0	0
UniversityWebsite	0		Ü	0	0	0	0
DepartmentWebsite	-	0 /	0	0	0	0	0
Sportsfacilities	0	0	0	0	0	0	0
	-0	0	0	0	0	0	0
HostelFacility	0	0	0	9	0	0	0
Drinking Water Facility	0	, 0	0/	0	0	0	0
WashroomFacilities	0/	0	0	0	0	0	0

12. Support System

For each question of statement please give your level of experience by putting one tick against the statement. A higher score indicates a better experience.

Parameters	Below Average	Average	Good	Very Good	Excellent	Don't Know	Not Applica
Experienceoftheadmissionprocesstothepro gramme you have enrolledin	0	0	0	0	0	0	<u>ble</u>
Helpreceived by OrientationprogrammeoftheDepartment	0	0	0	0	0	0	0
ExperiencewithUniversity'sAdministrativ eStaffs	0	0	0	0	0	0	0
ExperiencewithDepartment'sAdministrati veStaffs	0	0	0	0/	0	0	0
Experiencewith Announcement of Result	0	0	0	0	0/	0	0
ExperiencewithAvailability of Marksheet	0	0	0	0	0	0	0

Experience with Evaluation Drosses	_						
	0	0	0	0	0	0	0
-	0	0	0	0	0	0	0
· · · · · · · · · · · · · · · · · · ·	0	0	0	0	O	\circ	\cap
functioning of Placement cell of the			,		Ū	0	
	O	0	0/	0	0	0	0
Department	0	0	0	0	0	0	0
	ExperiencewithEvaluation Process Provision of Transport facility Availability of Healthcare Facility Functioning of Placement cell of the University Functioning of Placement cell of the Department	Provision of Transport facility Availability of Healthcare Facility Functioning of Placement cell of the University Cunctioning of Placement cell of the	Provision of Transport facility Availability of Healthcare Facility Functioning of Placement cell of the University Cunctioning of Placement cell of the	Provision of Transport facility Availability of Healthcare Facility Functioning of Placement cell of the University Cunctioning of Placement cell of the	Provision of Transport facility Availability of Healthcare Facility Functioning of Placement cell of the University Cunctioning of Placement cell of the	Provision of Transport facility Availability of Healthcare Facility Functioning of Placement cell of the University Cunctioning of Placement cell of the	Provision of Transport facility Availability of Healthcare Facility Functioning of Placement cell of the University Cunctioning of Placement cell of the

13. Skills developed during Course of Study

For each question of statement please give your level of experience by putting one tick against the statement. A higher score indicates a better experience.

	Below Average	Average	Good	Very Good	Excellent	Don't Know	Not Applica ble
IT Skills	0	0	0	0	0	0	0
Analytical Skills	0	0	0	0	0	0	0
Critical Skills	0	0	0	0	0	0	0
Leadership Qualities	0	0	0	0	0	0	0
Time Management	0	0	0	0	0	0	0
Clarity of Career Perspective	0	0	0	0	0	0	0
Team Work/ Collaboration Skills	0	0	0	0	0	0	0
Problem Solving Skills	0	0	0/	0	0	0	0
Entrepreneurial/ Job Skills	0	0	0	0	0	0	0
Communication Skills	0	0	0	9	0	0	0

14. Overall University Experience

For each question of statement please give your level of experience by putting one tick against the statement. A higher score indicates a better experience.

V. 0	Below Average	Average	Good	Very Good	Excellent	Don't Know	Not Applica ble
Your Overall Academic Experience Would You Recommend this University to	0	0	0	0	0	0	0
others	0	0	0	0	0	0	0

15. Suggestions, if any:

My overall experience is good in Department and
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The hours of the h
infrastructure is not good according to another
department.