

ABHILASHI UNIVERSITY

Chail Chowk, Tehsil Chachyot, Distt. Mandi (H.P.) Ph: 01907-250407, 250011, 250015

Email: registrar.au@abhilashi.in, regabhilashi@gmail.com, website: www.abhilashiuniversity.in

Student Feedback Form Regarding Syllabus

Name of the Student	Nationality if other than Indian
Gender	Programme name
Category	Student Unique Enrolment ID
State of Domicile	Mobile Number
	Year of joining

Instructions to fill the questionnaire:

- All 19 Questions should be compulsorily attempted.
- Each question has five responses, tick the most appropriate one.

		5	4	3	2	1
1.	How much of the syllabus was covered in the class?	85 to 100%	70 to 84%	55 to 69%	30 to 54%	Below 30%
2.	How well did the teachers prepare for the classes?	Thoroughly	Satisfactorily	Poorly	Indifferently	Won't teach at all
3.	How well were the teachers able to communicate?	Always effective	Sometimes effective	Just satisfactorily	Generally ineffective	Very poor communication
4.	The teacher's approach to teaching can best be described as	Excellent	Very good	Good	Fair	Poor
5.	Fairness of the internal evaluation process by the teachers.	Always fair	Usually fair	Sometimes unfair	Usually unfair	Unfair
6.	Was your performance in assignments discussed with you?	Every time	Usually	Occasionally/Sometimes	Rarely	Never
7.	The institute takes active interest in promoting internship, student exchange, and fieldvisit opportunities for students.	Regularly	Often	Sometimes	Rarely	Never
8.	The teaching and mentoring process in your institution facilitates you in cognitive, socialand emotional growth.	Significantly	Very well	Moderately	Marginally	Not at all
9.	The institution provides multiple opportunities to learn and grow.	Strongly agree	Agree	Neutral	Disagree	Strongly disagree
10.	Teachers inform you about your expected competencies, course outcomes and programme outcomes.	Every time	Usually	Occasionally/Sometimes	Rarely	Never
11.	Your mentor does a necessary follow-up with an assigned task to you.	Every time	Usually	Occasionally/Sometimes	Rarely	Never
12.	The teachers illustrate the concepts through examples and applications.	Every time	Usually	Occasionally/Sometimes	Rarely	Never
13.	The teachers identify your strengths and encourage you with providing right level of challenges.	Fully	Reasonably	Partially	Slightly	Unable to
14.	Teachers are able to identify your weaknesses and help you to overcome them.	Every time	Usually	Occasionally/Sometimes	Rarely	Never
15.	The institution makes effort to engage students in the monitoring, review and continuous quality improvement of the teaching learning process.	Strongly agree	Agree	Neutral	Disagree	Strongly disagree
16.	The institute/ teachers use student centric methods, such as experiential learning, participative learning and problem solving methodologies for enhancing learning experiences.	To a great extent	Moderate	Some what	Very little	Not at all
17.	Teachers encourage you to participate in extracurricular activities.	Strongly agree	Agree	Neutral	Disagree	Strongly disagree
18.	Efforts are made by the institute/ teachers to inculcate soft skills, life skills and employability skills to make you ready for the world of work.	To a great extent	Moderate	Some what	Very little	Not at all
19.	The overall quality of teaching-learning process in your institute is very good.	Strongly agree	Agree	Neutral	Disagree	Strongly disagree



Office Address: ___

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EMPLOYER'S FEEDBACK FORM

vallie oi	Emplo	oyer:	Nai	me of Organiz	ation: _			
Designat í	esignation: Mobile/Phone: ame of Employee:				En	nail:		
Name of			_ Desig	nation of Emp	oloyee: _			
<u>Note:</u>	(i)	Please give your valuable fee	dback a	according to th	he scale	of five by m	arking "√" in	the box
[S.No.	Attribute	Poor (1)	Satisfactory (2)	Good (3)	Very Good (4)	Excellent (5)	Rating
	1	Overall Interaction	\-/	\-/		\-',	ν,	
	2	Academic Knowledge						
-	3	General Awareness and confidence level						
	4	Communication and interpersonal skills						
_		Ability to work in team						
	6	Application of Knowledge for						
L		solving problems Technical Skills						
_		Ethical and Moral values						
-	9	Motivation						
-		Leadership Skills						
-		Initiative						
-		Usefulness to your						
		organization						
-	13	Administrative Skills						
	you r	Administrative Skills ate our support during placemen suggestions for improvement:						



Date:

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Faculty Feedback Regarding Syllabus (Session)

	Name of Teacher:	Designation:						
	Department:		Name of Scho	ol:				
a)	Details of subject's Taught							
	Name of Subject	Credit allocated	No. of Teaching hours allocated	No. Of Tutorial/Practical hours				
b)	Are the syllabi of the subject(s) taught by you standardized? Yes/No If No give Suggestions							
c)	Are the syllabi of the subject(s) taught by you in consonance with the requirements of Institution/industry? Yes/No If No give Suggestions							
d)	In your opinion which syllabus needs to be changed immediately							
e)	Addition/Deletion of any Topic	s in curriculum fr	om the next session					
f)	Any special/ additional topics t	o be provided to	the students.					

Name & Signature of faculty

Alumni Feedback Form



Branch:

Name of Alumnus: _____

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Degree Studied: ______
Passing Year: _____

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-		•
- 1	Session:	1
	Jession.	,

We shall be thankful to you and appreciate, if you can spare some of your valuable time to fill up this feedback form and give us your valuable suggestions for further improvement of the university.

Phone:			Email: _		
Current Employ Organization Working With:			of Alumnus		
Designation:					
Joined Year:					
Note:					
(i) Please give your valuable fee	dback accord	ling to the scale	of five by m	arking "√ " in t	the box
Attributes	Poor	Average	Good	Very	Excellent
	(1)	(2)	(3)	Good (4)	(5)
Admission Procedure					
Fee structure					
Faculty					
Laboratories & Equipment (if					
applicable)					
Classrooms					
Internet & Wi-Fi					
Project Guidance					
Quality of support material					
Sports and Cultural facilities					
Evaluation System					
Hostel Facilities					
Library/Seminar/Reading Room					
How do you rate the f	ollowing a	spects of Tra	ining & Pla	cement	
On campus Training & Placement					
Opportunities provided to you?					
Off and a Table of Black and					
Off campus Training & Placement					
opportunities provided to you?					
Career counseling and guidance for					
higher studies from T&P Cell?					
Environment					
Canteen Facilities					
Canteen Facilities					
To all and additional					
Teacher-student relationship					

How do you rate the courses that						
you have learned suiting the						
requirements of the institution?						
How do you rate the learning						
experience in terms of their						
relevance to the real life application?						
How do you rate the way your gr	ievances we	ere handled	at the Depa	rtment/Uni	versity	
As a student						
As an alumnus						
Rate the following academic	initiatives 1	taken by the	Departme	nt / Universi	ty	
Institution Oriented Projects (if applicable)						
Seminars &Workshops						
Guest Lectures						
Special Training						
Classes for						
Bridging Industry/Academic gap						
Overall Rating of the University						
University Administration						
 You would like to provide details in response (Yes) to questions 4-11 and question 12, please write them on additional page(s). Do you feel proud to be an Alumnus of Abhilashi University? Yes /No Are you willing to contribute to the development of the Department / University? Yes /No If you are invited to deliver a Guest Lecture / Special Talk / Motivational Session for your juniors, will you be interested? Yes /No Is there a need to improve the teaching and learning process? Yes /No Is there a need to improve the general environment in the University/Department and attitude of the people? Yes/No Is there a need for any change in curriculum and syllabi? Yes/No Have you ever been appreciated by your teachers, organization or peers? Yes/No Would you like to describe your most memorable moment in Abhilashi University? 						
Yes/No 9. Would you like to describe your vis	sion for the	Hnivorcity?			Yes/No	
10. Would you like to mention any co		•	ha Univers	itv?	Yes/No	
11. Is there a need to improve alumni	-			•	-	
12. Any other suggestions/comments:					Yes/No	



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STUDENT FEEDBACK FORM

General Facilities
Session:

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- (i) Please do not write your name or roll number on the form. The information provided by you will be kept confidential and will be used only for student participation in quality enhancement.
 - (ii) Please give your valuable feedback according to the scale of five by marking " \checkmark " in the box

Name of Course:	Class:	Semester:

S.No.	Name of Facility	Poor (1)	Average (2)	Good (3)	Very Good (4)	Excellent (5)	Rating
1	Transportation		. ,	, ,		. ,	
2	Safe Drinking Water						
3	Laboratories						
4	Class Rooms						
5	Sanitation and Hygiene						
6	Library						
7	Hostel						
8	Internet						
9	Cafeteria						
10	Sports						
11	Mess						
12	Medical						
13	Computing						