

## Parents' Feedback

Name of the Parent:	
Profession / Designation:	
Place of Work:	
Mobile No.:	
e-mail ID:	
Name of the Ward / Student:	
Name of the Program	
(B.Sc. / B.Tech. / BBA / M.Tech. / MBA):	
Department / Specialization:	
Year / Semester:	

## Please provide your valuable feedback on the 5-point scale.

S.No.	Item / Particulars	Excellent	Very good	Good	Average	Below average
		(5)	(4)	(3)	(2)	(1)
1	Curricular and co-curricular activities in the university					
2	Teaching standards and teachers' approach towards students in the university					
3	Technical knowledge and communication skills acquired by your ward					
4	The academic progress of your ward					
5	Student counseling and guidance support in the university					
6	Higher education and placement support in the university					
7	Student amenities and other infrastructure in the university					
8	Campus cleanliness and discipline in the university					
9	Conduction of parents-teacher meeting					
10	Recommendations / Suggestions, if any					

Signature