## **Students' Feedback Form**

## IQAC, MANUU

Semester:
Course:
Name of the Teacher(s):
<ol> <li>Did you learn the course/paper according to the objective it specified? Yes/no</li> </ol>
2. Do you feel the course/paper will be of any help to you in your career progression (for example, employment or higher studies? Yes/no
3. Have you had easy access to the course material (for example in the University Library or in market)? Yes/no
4. How do you evaluate the teacher who taught you the course? Excellent/Good/Average/Poor
5. Any other comment that you wish to make about your course or teacher or learning resources etc.