STUDENT'S FEEDBACK FORM: 2019-2020

This feedback form should be filled by ($\sqrt{}$) mark and handed over to the respective Class Adviser / Head of the Department.

Email *
b8617912@gmail.com
Student Name *
И. Bharath
Register Number *
P19MBA1004
Email ID *
bb8617912@gmail.com
Mobile Number with WhatsApp *
9865661222

Date of Birth *
MM DD YYYY
07 / 21 / 1998
Nationality *
Indian -
Community *
SC 🗸
Where did you come from? *
Rural
Residential Status *
Day Scholar 🗸

Blood Group *
Approximate distance of University from your residence (in km) * 6 to 10 km •
How do you generally commute to the University? *
O Walking
O Bicycle
Own Vehicle
Public Transport
O Private Transport(Auto/Hired Car)
Name of the Department *
Management Studies -
Programmers Offered *
M.B.A (Aided/Self Supportive)

Year *					
2 •					
Semester *					
IV •					
Are you part of / willing to participate in the following activity *					
SPORTS					
NSS NSS					
YRC YRC					
JRC					
ROTARACT CLUB					
VILLAGE ADAPTATION SCHEME					
Any other Social Welfare Activity					
NO					

Academic

Please rate Academic facilities. *

	Excellent	Good	Satisfactory	Unsatisfactory
Syllabus Content	۲	0	\bigcirc	\bigcirc
Coverage of Syllabus	\bigcirc	۲	0	\bigcirc
Teaching Methods	\bigcirc	۲	\bigcirc	\bigcirc
Laboratory Facilities	۲	0	0	\bigcirc
Teacher Guidance and Counselling	\bigcirc	۲	0	\bigcirc
Conduct of CFA Tests / ESE	۲	\bigcirc	0	\bigcirc
Staff-Student Relationship	0	۲	0	\bigcirc
CFA: ESE Weightage	۲	\bigcirc	0	\bigcirc

Facilities

Please rate the Campus facilities. *

	Excellent	Good	Satisfactory	Unsatisfactory
Classrooms	\bigcirc	۲	\bigcirc	0
Internet Browsing	\bigcirc	۲	\bigcirc	\bigcirc
Amenity / Services	\bigcirc	۲	\bigcirc	\bigcirc
Hostel	\bigcirc	۲	\bigcirc	\bigcirc
Recreation	\bigcirc	۲	\bigcirc	\bigcirc
Health Care	\bigcirc	۲	\bigcirc	\bigcirc
General Library	۲	\bigcirc	\bigcirc	\bigcirc
Department Library	۲	\bigcirc	\bigcirc	\bigcirc
Extracurricular	۲	\bigcirc	\bigcirc	\bigcirc

Extension Activities

Please rate the Extension Activities. *

	Excellent	Good	Satisfactory	Unsatisfactory
Outreach Activities	0	۲	\bigcirc	\bigcirc
Participation in Extension Activities	\bigcirc	۲	\bigcirc	\bigcirc
Your Overall Observation about	\bigcirc	۲	0	\bigcirc
Programme of your Study	۲	\bigcirc	\bigcirc	\bigcirc
Facilities Made Available	\bigcirc	۲	\bigcirc	\bigcirc
Administration Support Given	0	0	۲	\bigcirc
Extra-Curricular Activities Provided	\bigcirc	۲	0	\bigcirc
Examination System	۲	\bigcirc	\bigcirc	\bigcirc
Suggestions if any:				
Improvement of admission cell				

Influence of COVID-19 on student's performance/ Life

STUDENT'S FEEDBACK FORM: 2019-2020

This feedback form should be filled by ($\sqrt{}$) mark and handed over to the respective Class Adviser / Head of the Department.

Email *
sugumarmadhan98@gmai.com
Student Name *
Madhan kumar .S
Register Number *
P19BIC1008
Email ID *
sugumarmadhan98@gmail.com
Mabile Number with M/bate App *
Mobile Number with WhatsApp *
8754159455

Date of Birth *
MM DD YYYY
11 / 12 / 1998
Nationality *
Indian -
Community *
BC -
Where did you come from? *
Rural
Residential Status *
Hosteler -

Blood Group * O+ •
Approximate distance of University from your residence (in km) * 1 to 5 km
How do you generally commute to the University? *
O Walking
O Bicycle
Own Vehicle
O Public Transport
O Private Transport(Auto/Hired Car)
Name of the Department *
Biochemistry
Programmers Offered *
M.Sc (Biochemistry)

Year *					
2 •					
Semester *					
IV -					
Are you part of / willing to	o participate in the following activity *				
SPORTS					
NSS NSS					
YRC YRC					
JRC					
ROTARACT CLUB					
VILLAGE ADAPTATION	SCHEME				
Any other Social Welfare	Activity				
no					

Academic

Please rate Academic facilities. *

	Excellent	Good	Satisfactory	Unsatisfactory
Syllabus Content	۲	0	0	\bigcirc
Coverage of Syllabus	۲	0	0	\bigcirc
Teaching Methods	۲	0	0	\bigcirc
Laboratory Facilities	۲	0	0	\bigcirc
Teacher Guidance and Counselling	۲	0	0	\bigcirc
Conduct of CFA Tests / ESE	۲	0	0	\bigcirc
Staff-Student Relationship	۲	0	0	\bigcirc
CFA: ESE Weightage	۲	0	0	\bigcirc

Facilities

Please rate the Campus facilities. *

	Excellent	Good	Satisfactory	Unsatisfactory
Classrooms	۲	\bigcirc	\bigcirc	\bigcirc
Internet Browsing	۲	\bigcirc	\bigcirc	\bigcirc
Amenity / Services	۲	\bigcirc	\bigcirc	\bigcirc
Hostel	\bigcirc	\bigcirc	\bigcirc	۲
Recreation	۲	\bigcirc	\bigcirc	\bigcirc
Health Care	۲	\bigcirc	\bigcirc	\bigcirc
General Library	۲	\bigcirc	\bigcirc	\bigcirc
Department Library	۲	\bigcirc	\bigcirc	\bigcirc
Extracurricular	۲	\bigcirc	\bigcirc	\bigcirc

Extension Activities

Please rate the Extension Activities. *

	Excellent	Good	Satisfactory	Unsatisfactory
Outreach Activities	0	۲	0	0
Participation in Extension Activities	\bigcirc	۲	0	0
Your Overall Observation about	۲	0	0	0
Programme of your Study	۲	0	0	0
Facilities Made Available	۲	0	0	0
Administration Support Given	۲	0	0	0
Extra-Curricular Activities Provided	۲	0	0	0
Examination System	۲	0	0	0
Suggestions if any:				
no				

Influence of COVID-19 on student's performance/ Life