

PANJAB UNIVERSITY, CHANDIGARH

Teacher-wise feedback from students

Note:

- i. This form is to filled by the student having at least 65% attendance.
- ii. Please do not write your name or roll number on the form.
- iii. The information provided by you will be kept confidential and will be used only for student participation in quarterly enhancement.

Name of the teacher.....

Department.....

Subject title

Class.....

Semester.....

For each item, please indicate your level of satisfaction with the following statement by choosing (✓) a score between 1 and 5.[1. Strongly Disagree,2. Disagree, 3. Neither agree nor disagree, 4. Agree, 5 Strongly Agree.]

S.NO	Curriculum, Teaching, Learning and Evaluation:	1	2	3	4	5
1.	The teacher completes the entire syllabus in time.					
2.	The teacher is a content expert and has adequate knowledge about the subject/course.					
3.	The teacher communicates clearly and well prepared.					
4.	Teacher inspires me by his/her teaching.					
5.	The teacher is punctual in the class.					
6.	The teacher encourages participation and discussion in the class.					
7.	The teacher uses teaching aids, handouts, give suitable references.					
8.	The teacher is available and accessible in the department.					
9.	The internal evaluation process is fair and unbiased.					
10.	The teacher maintains professionalism in all areas.					