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| C:\Users\admin\Downloads\bamulogo4.png | **Dr. Babasaheb Ambedkar Marathwada University, Aurangabad**  PARENT FEEDBACK FORM |

Name of the Parent: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Qualification: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Present Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Residential Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Office Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-Mail ID : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Mobile No : \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Class: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Semester/Year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

For each item please indicate your level of satisfaction with the following rating (**A–Average, G -Good, E–Excellent, O–Outstanding)**

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| **I. About Course Curriculum** | | Sub**1** | Sub**2** | Sub**3** | Sub**4** | Sub**5** |
| a | The Course objectives & outcomes were clearly defined / identified |  |  |  |  |  |
| b | Content of Curriculum |  |  |  |  |  |
| c | **Relevance** : Course material were relevant |  |  |  |  |  |
| d | **Quality :** Course material were of high quality and Up-to-date |  |  |  |  |  |
| e | **Organization:** Material were well organized. Assignment of reading material for each class was of appropriate length |  |  |  |  |  |
| f | The course provides focus on skill Development/ Employability / Entrepreneurship |  |  |  |  |  |
| **II. About Infrastructure of the Department** | | | | | | |
| a | Sufficient facilities are available in the department |  | | | | |
| b | Toilets/washrooms are hygienic and properly maintained. |  | | | | |
| c | Clean drinking water is available in the department and on the campus. |  | | | | |
| d | Number of PCs needed for the course are adequate |  | | | | |
| e | Equipment in the labs are in working condition |  | | | | |
| f | Computer lab is accessible |  | | | | |
| g | Internet facility is available |  | | | | |

**III. How long you have been associated with the Department?**

Date of Association:

**IV. Have you participated in any Parent meet as of now organized by the department**?

**V. Do you receive communications from the department through Mails/ Calls/SMS etc. ?**

**VI. How far this Department contributed in your overall Development of your ward?**

**VII. How would you like to contribute to the University in future? (Academically/Financially/any other way)**

**VIII. Any other suggestions/comments:**

**Date: Signature of the Parent**