

GOVERNMENT POLYTECHNIC,DAMAN

Varkund, NaniDaman,Daman-396210

Session 2020-21

Department of _____

Student Feedback Form

Date: __/__/____

Branch:	Year: 2020-21	Semester: VI
Responses: 5- Excellent, 4-Very Good, 3- Good, 2- Poor, 1- Very poor		
Enter Correctly in appropriate box for each subject		

Sr No	Description	Sub1	Sub2	Sub3	Sub4	Sub5
1	Has the Faculty covered entire Syllabus as prescribed by GTU (Gujarat Technological University)					
2	Has the Faculty covered relevant topics beyond syllabus					
3	Effectiveness of Teacher in terms of .					
	a) Technical content/course content					
	b) Communication skills					
	c) Use of teaching aids					
4	Pace on which contents were covered					
5	Motivation and inspiration for students to learn					
6	Support for the development of Students' skill					
	a) Practical demonstration					
	b) Hands on training					
7	Clarity of expectations of students					
8	Feedback provided on Students' progress					
9	Willingness to offer Help and advice to Students					

Subject Abbreviation:	Faculty Abbreviation
Sub1	
Sub2	
Sub3	
Sub4	
Sub5	