

Date.....

The Principal
I.T.S Centre for Dental Studies & Research
Murad Nagar,
Ghaziabad

Reg..... of my ward.

Dear Sir,

I..... F/o Student of BDS
..... (Batch) have come to the college onat
.....AM/PM and meet the concerned co-ordinator and discuss about the of
my ward.

I have following comments about my ward:

Date.....

Signature of Parent

Comments of Co-ordinator

Date.....

Signature of Co-ordinator

Signature of the Principal

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Subject	Name of Faculty	(Rating)
Biochemistry	Dr. Jaspreet Kaur	
Parameters		
Knowledge base of the teacher (as perceived by you)		Select
Communication Skills (in terms of articulation and comprehensibility)		Select
Sincerity / Commitment of the teacher		Select
Interest generated by the teacher		Select
Ability to Integrate course material with environment/other issues, to provide a broader perspective		Select
Ability to integrate content with other courses		Select
Accessibility of the teacher in and out of the class		Select
Uses of AV aids by teachers		Select
Motivation to learn		Select
Lecture provides emphasis for reference work and require further reading in library		Select
Go		

Remarks on faculty member which may be helpful in teaching/learning process

I.S.S Dental College, Murad Nagar


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I.T.S Dental College, Murad Nagar Online Student Feedback System

Welcome! Student

Student Feedback Form

Note:

The parameters shall have maximum scoring of 4

Following are the ten parameter for scoring. Please understand carefully the meaning / interpretation of these parameters.

- 1. Knowledge base of the teacher (as perceived by you):** this section includes the consideration of the basic knowledge of the teacher on the subject and the areas related to the subject field so as to help you in better understanding of the subject. It includes how the basic principles and strategies of a subject are best acquired and retained by the teacher.
- 2. Communication Skills (in terms of articulation and comprehensibility):** It refers to the conveying medium of the information on the subject. It includes the skills that are required to convey message to others through words, facial expressions and body language.
- 3. Sincerity / Commitment of the teacher:** It refers to the involvement and dedication of the teacher with the students and the subject. It tells how much the teacher is sincere and committed to the subject.
- 4. Interest generated by the teacher:** It includes how much the teacher is making the topic interesting and generating the interest of the students towards the subject.
- 5. Ability to integrate course material with environment / other issues, to provide a broader perspective:** It includes the ability of a teacher to bridge the subject of the study with other general issues providing good examples and explanations so as to help the students to better perceive the subject.
- 6. Ability to integrate content with other courses:** As the subjects in dentistry are inter-related, it refers the ability of a teacher to correlate the subject with other courses.
- 7. Accessibility of the teacher in and out of the class:** Includes availability of the teacher to motivate further study, query and discussion outside class.
- 8. Uses of AV aids by teachers:** Includes the use of automatic smart boards, pointers, models and other aids so as to explain the subject better.
- 9. Motivation to learn:** It includes the inspiration and encouragement of the students by the teacher to work hard for better results.
- 10. Lecture provides emphasis for reference work and require further reading in library:** It includes how much the lecture is directing attention and effort towards further referring and reading the subject.

[Proceed](#)

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I.T.S CENTRE FOR DENTAL STUDIES & RESEARCH

Delhi-Meerut Road, Murad Nagar, Ghaziabad – 201 206

ALUMNI FEEDBACK FORM

ESSENTIAL DETAILS

Alumni Name			
Father's Name			
Date of Birth (DD/MM/YY)			
Year of Passing out		Branch	
Permanent Address			
Contact No.		Mobile No.	
E-Mail ID			
Present Organization			
Designation		Present Location	

KINDLY SELECT THE APPROPRIATE OPTION AS PER THE FOLLOWING CRITERIA.

A. Highly Efficient B. Efficient C. Satisfactory D. Below Satisfaction

I. Feedback About College

1. Do you feel proud to be associated with ITS-CDSR as an Alumni? Yes No
2. How do you rate development activities organized by the college for your overall development? A B C D
3. Are you willing to contribute the development of the college? Yes No
4. Where / are you grievances properly handled at the college
(A) As a student Yes No
(B) As a alumni Yes No

4. Rate the adequacy of following as they were during your tenure as a student at ITS-CDSR

• Clinical work

A B C D

• Laboratories & Equipments

A B C D

• Library

A B C D

• Computer Facilities

A B C D

• Internet & Wi-Fi

A B C D

II. Feedback about department & Faculty

1. Have you obtained sufficient technical know-how (both in theory and practical) at ITS-CDSR?

Yes No

2. Is the education imparted at ITS-CDSR useful and relevant in your present job?

Yes No

3. Were the HOD's & Faculties cooperative?

Yes No

III. Generalized Experience Sharing

1. **Have you ever been appreciated by your Faculty.** If yes, please share details

Peers. If yes, please share details

2. **Have you made any significant achievement as:**
A student of ITS-CDSR. If yes, please share details

An Employee of your organization. If yes, please share details

3. Most Memorable Moment in the College

4. Suggestion for improvements

Signature

Date

