



# JAGANNATH UNIVERSITY

Form-'JNU/FD/7'

This is a confidential document and will be handled by the Director only.

% of Attendance-

## FACULTY FEEDBACK FORM

Course:

Semester:

Section:

**Objective:** The purpose of this feedback is to further improve the performance of the faculty with your cooperation. Kindly play the role of a counselor rather than that of a Judge. Your assessment should be unbiased and objective.

Please rate the Faculty and other facilities on a 6 point scale, ranging from 6 (very high rating) to 1 (very low rating). Indicate the rating on various attributes\* and overall competence.

6	5	4	3	2	1
Excellent	Very Good	Good	Fair	Poor	Very Poor

### A. Faculty

Subject	Name of the Faculty	A Knowl edge	B Comm Skill	C Giving Assignments	D Interactive Approach	E Control over the class	F Overall Rating

Any Problem related to Faculty

# ANNEXURE - 1

Certified True Copy

Registrar  
Jagan Nath University, Jaipur

735 -105-

**B. Overall Facilities (Academic, Infrastructure, Co Curricular of JNU (on 6 point scale )**

**C. Library**

a. Subjects & Books Availability

b. Reference books availability

c. Library Timings

**D. Computer Lab**

a. Proper functioning of PCs

b. Speed of Internet

**E. Infrastructure**

a. Cleanliness of the class room

b. Cleanliness of toilets

**F. Canteen**

a. Quality of food at canteen

b. Variety of food available in the canteen

**G. Co-Curricular Activities**

a. Sports

b. Cultural Activities

**H. Complaints/ Suggestions:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Certified True Copy*

*Registrar  
Jagan Nain University, Jagan*

**Note:** Do not write your Name or Roll No. anywhere on the form.  
Please write suggestions (if any), for improvement overleaf.

106 737