

Feedback Form for The Parents/Guardians

Name of the Parent/Guardian:

Name of the student:

Semester:

1. Do you believe that the college and its environment is conducive to your wards (Son/Daughter) development?	Yes	No	Not sure
2. Are you satisfied with the curriculum?			
3. Are you satisfied with the teaching learning environment of the college?			
4. Do you encourage your child to participate in the cocurricular activities of the college?			
5. Has your ward complained against behaviour of any staff of the college?			
6. Any other suggestion/feedback regarding the functioning of the College?			

Signature: