ARYA COLLEGE OF ENGG. & RESEARCH CENTRE

Student Feedback form

COURSE CURRICULUM/EVALUATION FORM

Name (Optional):…… **Dept.:……** **Sem:……** **Date:…….**

GRADE	**Strongly Agree - 10, Fairly Agree - 9**
	Agree - 8, Disagree - 7

Sr. No	Name of Subject	Subject Name:-	Subject Name:-	Subject Name:-	Subject Name:-	Subject Name:-	Subject Name:-
1	**Difficulty level of Subject** **Hard-H** **Moderate-M** **Easy-E**						
2	The course objectives were clear						
3	The course workload was managable						
4	Is This Subject is Industrial Oriented?						
5	The course enhance my abilities and skills						
6	The course provided a mixture of explanation and practice						

Suggestion if any:

Signature of Student