

CSMSS
AYURVED MAHAVIDYALAYA
Kanchanwadi, Aurangabad.
(ISO: 9001-2015)

Form No.2

STUDENTS FEEDBACK ON TEACHERS

Course: 1st / 2nd / 3rd / 4th BAMS

Date:-

Name of Faculty Member: Vd. _____

* Tick to Appropriate.

Sr. No.	Focus Area	Best	Good	Average	Poor
1	Voice				
2	Class Control				
3	Command on Language				
4	Punctuality				
5	Teaching Techniques (Theory / Bedside / Clinic)				
6	Preparation of Topic before Lecture by Teacher				
7	Syllabus Covered till date				
8	Knowledge Sharing				
9	Efforts for Improvement of Students				
10	Interaction with Students				
11	Teachers Participation & Motivation for Student in Extra Curricular Activity				
12	Behavior with Students				

Other opinion if student wishes to express about the teacher (in brief):-