Centre of Excellence GOVT. COLLEGE SANJAULI, SHIMLA-171006 INTERNAL QUALITY ASSURANCE CELL (IQAC) Shimla-171005

FEEDBACK FORM FOR TEACHER EVALUATION BY STUDENTS

Note: This questionnaire has been designed by Himachal Pradesh University to seek a feedback from the student to strengthen the quality of teaching-learning environment and to look for opportunities to improve teacher's performance in classroom engagement with students to bring excellence in teaching and learning.

Name of the Department	/Institute		
Class	Session	Semester	
Name of teacher:	Sub	ject taught & Course No	
Total number of lectures	delivered by teacher in t	the session/semester:	
	•	g the form with percentage attendance he/she is requested	

IN THE FOLLWING TABLE TICK (\checkmark) THE APPROPRIATE CHOICE FOR EACH POINT.

Rating		(Below	(Avg.)	(Good)	(Very	(Excellent)
Subject		Avg.)	2	3	Good) 4	5
A.	TIME SENSE	1				
1	Punctuality in the Class					
2	Regularity in taking Classes					
3	Students' attendance/ presence in					
5	the class of teacher who is being					
	evaluated					
4	Completes syllabus of the course in					
	Time					
5	Scheduled organization of					
	assignments, class test, quizzes and					
	seminars					
6	Makes alternate arrangement of					
	class in his/her absence					
	Sub					
	Total (A)					
В.	SUBJECT COMMAND					
7	Focus on Syllabi					
8	Self-Confidence					
9	Communication skills					
10	Conducting the classroom discussions					
11	Teaching the subject matter					
12	Delivery of structured lecture					
13	Skill of linking subject to life experience &					
	creating interest in the subject					
14	Refers to latest developments in the subject					
	Sub Total (B)					
С.	USE OF TEACHING METHODS/TEACHING AIDS					
15	Uses of teaching aids (OHP/Blackboard/PPT's)					
16	Blackboard/Whiteboard work in terms of					
	legibility, visibility and structure					
17	Uses of innovative teaching methods					
18	Shares the answer of class tests or sessional test					
	questions after the conduct of the class					
	tests/sessional test.					
19	Shows the evaluated answer books of class tests					
	to the students					
20	Makes sure that he/she is being understood					
	Sub Total (C)					
D	HELPING ATTITUDE					
21	Helping approach towards varied academic					

	interests of students		
23	Helps student in providing study material which		
	is not readily available in the test books say		
	through e-resources, e-journals, reference		
	books, open course wares etc.		
24	Helps students irrespective of gender		
25	Helps students facing physical, emotional and		
	learning challenges		
26	Approach towards developing professional skills		
	among students		
27	Helps students in realizing career goals		
28	Helps students in realizing their strengths and		
	developmental needs		
	Sub Total (D)		
Ε	LABORATORY INTERACTIN (Only for Laboratory		
	Courses)		
29	Regular checking laboratory log books/note		
	books		
30	Availability of teacher in the laboratory for		
24	whole duration of laboratory hours		
31	Helping the students in conducting experiments		
22	through set of instructions or demonstrations		
32	Helps students in exploring the area of study		
22	involved in the experiment		
33	Follows open ended approach for conducting		
34	the experiments		
54	Takes interests in conduct of Laboratory seminars, group discussions etc.		
	Sub Total (e)		
F.	CLASS CONTROL		
35	Control mechanism in effectively conduction the		
55	class		
36	Students' participation in the class		
37	Skills of addressing inappropriate behaviour		
38	Tendency of inviting opinion and question on		
	subject matter from students		
39	Enhances learning by judicious reinforcement		
	mechanism		
40	Inspires students for ethical conduct		
41	Acts as a role model		
	Sub Total (F)		
	Total (A+B+C+D+E+F)		
	Additional Remarks (If		
	any):	 	

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(Please cut along the dashed line and deposit it separately)

Name of the Student				
Name of the Department/Institute				
Name of the Teacher who has been evaluated				
Title of the course and course no. taught by the teacher				
Session Class	Semester	Roll No		

Date.....

Signature of the student

(Please cut along the dashed line and deposit it separately)

Name of the Student		
Name of the Department/Institute		
Name of the Teacher who has been evaluated		
Title of the course and course no. taught by the	teacher	
Session Class	Semester	Roll No

Date.....

Signature of the student

(Please cut along the dashed line and deposit it separately)

Session	Class	Semester	Roll No
Title of the course and o	course no. taught by the	teacher	
Name of the Teacher w	ho has been evaluated		
Name of the Departme	nt/Institute		
Name of the Student			

Date.....

Signature of the student