



**TEACHERS' FEEDBACK FORM**

Name of the Faculty: \_\_\_\_\_

Name of the program: **B. Pharm/M. Pharm**

Semester: \_\_\_\_\_

Course: \_\_\_\_\_

Type of course: **Core/Elective/Theory/Practical**

**Faculties Feedback on Syllabus**

Feedback about the Course – Please tick (√) appropriate box Q.1 to 14 is applicable for both Theory and Practical						
Sr. No.	Particulars	Excellent	Good	Average	Fair	Poor
1.	Syllabus sufficient to bridge the gap between industry standards/current global scenarios and academics					
2.	The units/sections in the syllabus are properly sequenced and duly justified so.					
3.	The curriculum provides opportunity for the internship/training/conducting research and project related activities.					
4.	Timely coverage of syllabus possible in the mentioned number of hours.					
5.	The depth of the course content is adequate to have significant learning outcomes.					
<b>What do you feel about syllabus?</b>						
The syllabus is		Challenging	Adequate	Inadequate	Dull	Irrelevant

• **Rate your syllabus on following points**

	<b>Particulars</b>	<b>Excellent</b>	<b>Good</b>	<b>Average</b>	<b>Fair</b>	<b>Poor</b>
1.	Learning value (in term of skills, concepts, knowledge, analytical abilities or broadening perspective)					
2.	Applicability/Relevance to real life situations					
3.	Depth of the course content					
4.	Extent of the coverage of course					
5.	Relevance/Learning value of project/report					
Remark (if any)						
Signature						

**Principal**

Dr. (Mrs.) Sudha Rathod

**In-charge**