

Parents Feedback on Curriculum

Campus:		Department	:		
Program:		Program type:			
Academic Year:		Semester:			
Student & Parent D Student ID: Parent Name: Address:	etails		Student Nam Parent Occu Contact No.	ipation:	
1. How do you rate the courses in differ	the program that your cent semester?	r ward is unde	ergoing in term of	the load of	
5.Excellent	4. Very Good	3. Good	2. Average	1. Poor	
2. How do you rat Market?	e the availability of	the Text and	l reference books	in the	
5.Excellent 3. How do you ra semester?	4. Very Good te the quality and re	3. Good elevance of the	2. Average he course including	1. Poor ng into the	
5.Excellent	4. Very Good	3. Good	2. Average	1. Poor	
•	te the treatment of students that includes			•	
5. Excellent	4. Very Good	3. Good	2. Average	1. Poor	
5. How do you ra programs?	te ambience of the	KLEF for ef	fective delivery of	of the academic	
5.Excellent	4. Very Good	3. Good	2. Average	1. Poor	
	e the course in terms		U		
future technologies				E	
5.Excellent	4. Very Good	3. Good	2. Average	1. Poor	
7. How do you rate the workload?	the programs based o	n the comfort	of your ward in c	oping with	
5.Excellent	4. Very Good	3. Good	2. Average	1. Poor	
8. How do you rate	the quality of teaching	g in the KLEF	?		
5.Excellent	4. Very Good	3. Good	2. Average	1. Poor	



- 9. How do you rate the outcomes that your ward has achieved from the courses
 - 5.Excellent
- 4. Very Good
- 3. Good
- 2. Average
- 1. Poor
- 10. How do you rate the transparency of the evaluation system in the KLEF?
 - 5. Excellent
- 4. Very Good
- 3. Good
- 2. Average
- 1. Poor

Recommendation for course improvements (please specify topics that should be added/dropped from the course, new books to be recommended, change in teaching scheme and experiments, etc, if any)

Signature with Date

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