CHAITANYA BHARATHI INSTITUTE OF TECHNOLOGY

Direct Feedback Form (Project : Part 1 / 2)

Academic Year: 20 - 20

Name(s) of the Faculty and	
Department	
Name of the Program, Semester	
and Section	
Name of the Course (with code)	

Committee	Name of the Member
Member(1)-Nominated By the Principal	
Member(2) -Nominated By the Principal	
Member(3)-Respective Program Head	

Metrics for Direct Feedback

The students are directed to rate the feedback score on a Scale of 1(Min) to 10 (Max)

Sl. No	SI. No Description/Parameter	
1.	1. Is the teacher punctual and regular to the Project Reviews?	
2.	Is the teacher enthusiastic in conducting Project Reviews?	
3.		
4.	Does the teacher announces in advance the Project Review schedules?	
5.	Does the teacher share the scope of the Project?	
6.	Does the teacher share instructions and guidelines for Project Reviews?	
7.	Does the teacher evaluate regularly (CIE)?	
8.	Does the teacher conducts awareness pertaining to Technical Education in emerging areas?	
9.	Does the Teacher encourages Projects in Emerging Technologies?	
10.	Does the Teacher encourages participating in professional societies activities/conferences /journals?	
	Total	
Average Feedback Score on a scale of 10		
Any oth	ner relevant information :	

Signature of the Member(1) (Nominated by Principal) Signature of the Member(2) (Nominated by Principal) Signature of respective Program/Coordinating Head

PRINCIPAL