



B.T. Institute of Excellence

(Approved by Higher Education, Govt. of M.P. and NCTE, New Delhi)

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Run by : Little Star Education Society

Ref. No. _____

Date : _____

Name of the Parents - _____

Degree/Year obtained - _____

Department Name - _____

Please rate the college from Parent's perspective (tick one box for rating)

Your Feedback :

Rating Score*

	5	4	3	2	1
1) Quality of Teaching	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) Discipline and Security	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) Laboratory facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) Extracurricular activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5) Campus atmosphere	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6) Sports Facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7) Examination system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8) Student amenities such as Bus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9) Wi-Fi, Library, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Average	
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10) Suggestion for improvement in about 50 words. - _____

*Rating Score: 5 = Excellent, 4 = Very Good, 3 = Good, 2 = Average, 1 = Poor

