

MVJ COLLEGE OF ENGINEERING, BENGALURU
Student Feedback Form for the Academic Year

USN:.....Name:

Department:.....

Years/Semester: (-----) I / II / III / IV

Address.....

Mobile.....

E-mail.....

Please give a rating of your course on the following:-

SI #	Item	Excellent	Good	Satisfactory	Average
1	Applicability to the defined PO,PEO,PSO				
2	Library holdings for the courses are				
3	The internal Evaluation system				

Signature:

Date: