



SAINTGITS

# SAINTGITS COLLEGE OF APPLIED SCIENCES PARENTS - FEEDBACK FORM

Please share your input about the following details for parental involvement documents and our overall college parental activities. Your feedback is essential in helping us to build parent and staff relation in college. We welcome all of your comments and suggestions.

Parent Name BINDU.P.VAIR

Contact Number 9961222118

(Parent)

Email msr.ncsks72@gmail.com

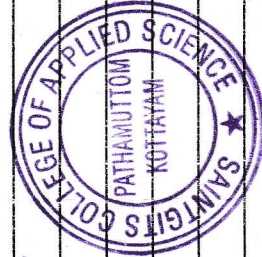
Student Name AMAL-SURESH.KUMAR

Department B.COMMERCE

Class S<sub>4</sub>A

Make a tick (✓) mark in the appropriate cell for rating:-

	3 Very Good	2 Good	1 Satisfactory
<b>Academics</b>			
1. Quality of teaching offered by the college	✓		
2. Cooperation from administrative staff	✓		
3. Discipline maintained by the college	✓		
4. Technical knowledge and communication skills acquired by your ward after the admission to our college	✓		
5. Value added courses offered in the college	✓		
<b>Facilities / activities</b>			
6. Library	✓		
7. Student's counseling and guidance	✓		
8. Extracurricular activities and sports	✓		
9. College bus		✓	
10. Canteen		✓	
11. Hostel		✓	
12. Clubs / Associations	✓		
Suggestions (if any):	Total	Total	Total
	8	2	-



Thank you for your feedback !!

Bindu Spiker  
Signature of Parent

Place : Pathamuttom

Date : 20-03-19

Prof. M. C. Joseph  
Principal