



M.L.T. COLLEGE, SAHARSA

FEEDBACK FORM

GENERAL ADMINISTRATION

Name of the Student:.....

Department:.....

Class:.....

Roll No..... Session:.....

1. Is the office helpful in administrative matters Yes / No
2. Do you receive the mark statements in time Yes /No
3. Are there enough clean class rooms available
In the Department Yes /No
4. Are the toilets Cleaned properly Yes / No
5. Are you provided with enough drinking water Yes / No
6. Are you happy with the food served in the present
Canteen Yes / No
7. Do You think that your grievances are redressed Yes / No
8. Are You aware of the functioning of a Placement
Cell in your college Yes / No
9. Are the Lab. Equipments are in proper working
Conditions Yes / No
10. Are you provided with adequate quantity of
chemicals and specimen for carrying out
Lab. Activities Yes / No
11. Do you avail any scholarship from the University Yes / No
12. Are you a beneficiary of free education scheme
Of your university Yes / No
13. If any Others

Signature: _____