

JAWAHARLAL NEHRU ARCHITECTURE AND FINE ARTS UNIVERSITY

Student Feed Back Form

| <b>Course</b>   | Photography   | Please specify at what is the stage of course you are evaluating this form<br>Ongoing      M = Middle,      E = End or Completed)      (O = |                       |                         |                              |           |     |     |     |     |
|-----------------|---|---|-----------------------|-------------------------|------------------------------|-----------|-----|-----|-----|-----|
| <b>Year</b>     | IV  |   |                       |                         |                              |           |     |     |     |     |
| <b>Semester</b> | I   |   |                       |                         |                              |           |     |     |     |     |
| S.No.           | Description of the aspects of the Semester  | Subject Name  | Television Production | Professional Video Tech | Advance Post-Production Tech | Portfolio | NIL | NIL | NIL | NIL |
|                 |   | Code  | 411T                  | 412P                    | 413P                         | 414P      | NIL | NIL | NIL | NIL |
| 1               | Approximately how many classes have you attended out of the total classes conducted. Specify (A = Above 75%, B Above 65%, C = Above 50%, D = Below 50%) | A/B/C/D   |                       |                         |                              |           | NIL | NIL | NIL | NIL |
| 2               | How would you rate the overall effectiveness of this subject?   | Poor/Average/Good   |                       |                         |                              |           | NIL | NIL | NIL | NIL |
| 3               | On a scale of 1 to 10 how would you rate the satisfaction of learning outcome?  | 1 to 10   |                       |                         |                              |           | NIL | NIL | NIL | NIL |
| 4               | Identify the reasons for the above  | 1) Syllabus and Curriculum<br>2) Faculty effectiveness<br>3) Facilities available   |                       |                         |                              |           | NIL | NIL | NIL | NIL |
| 5               | Do you feel you have gained required Knowledge/ Skill / Practical Exposure?   | Yes/No  |                       |                         |                              |           | NIL | NIL | NIL | NIL |
| 6               | Write feed back if any in the space provided  |   |                       |                         |                              |           |     |     |     |     |