



# S.D. COLLEGE FOR WOMEN

3, JAWAHAR NAGAR, MOGA

## FEED BACK FORM FOR PARENTS

Name & Designation : \_\_\_\_\_

Present Postal Address : \_\_\_\_\_

Mobile / Phone No. : \_\_\_\_\_

Name of the Student	Class	Semester / Annual	Session

The extent to which the following facilities of college satisfy you :

	Excellent	Very Good	Good	Poor	Very Poor
Quality of Teacher					
Infrastructure					
Administration					
Discipline					
Canteen					
Extra Curricular /Sports					
Library					
Hostel					
Medical					
Curriculum					

1) Please give your valuable suggestion for improvement of the college.

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