

MEGHNA INSTITUTE OF DENTAL SCIENCES

Approved by – Dental Council of India, New Delhi &
 Affiliated by Kaloji Narayana Rao University of Health Sciences, Warangal, T.S

Mallaram (V), Varni Road, Nizamabad Dist.-503 003, T.S. Ph: 95054454556

STUDENT FEEDBACK FORM – GUEST LECTURE

As part of a continuing improvement process, our college appreciates suggestions and inputs regarding the institution. We request you to sincerely answer these questions under assurance of complete confidentiality. Your interest in making our institution better is greatly appreciated.

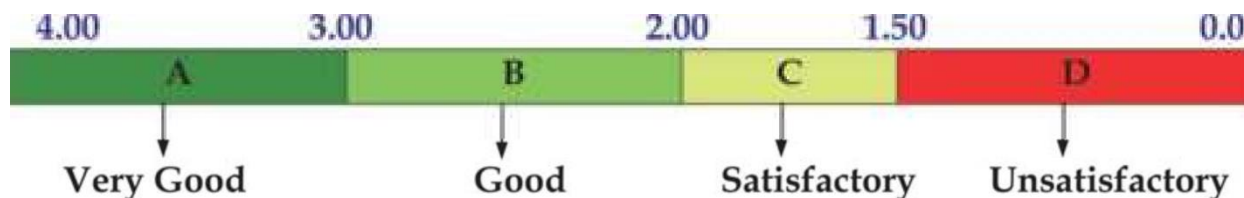
Name of Speaker:

Program:

Department/Subject:

Date:

Students are required to rate the speaker on the following attributes using the 4 -point scale shown.



Parameter	A	B	C	D
Your perception of his/her knowledge				
Communication skills				
Sincerity/commitment				
Stimulating interest in subject				
Ability to make the subject relevant to profession and life				
Eliciting feedback				
Overall rating				