# CHHATRAPATI SHAHU JI MAHARAJ UNIVERSITY, KANPUR

(Estd.1966)

## Office of the Co-ordinator-Internal Quality Assurance Cell (IQAC)

## PARENTS FEEDBACK FORM

**Parents Information:**

Full Name : Indra Devi

Address : VIII X Post-Rasa Dandiya Teh-Milak Rampur

**Fill in the box with the number given below:**

| | | |
|---|---|---|
| 1) | Curricular | 4 |
| 2) | Infrastructure | 4 |
| 3) | Fee Structure | 4 |
| 4) | Teacher-Student relation | 5 |
| 5) | Non-Teaching/Staff-Student relation | 3 |
| 6) | Extra-curricular activity | 4 |
| 7) | Financial aid (fee assistant, scholarship etc.) | 5 |

**5 – Excellent, 4 – Very Good, 3 – Good, 2 – Fair, 1 – Poor**

**Suggestion if any:**

Department is very helpful

Signature of the Parent/Guardian : Indra Dey

Signature : _____

Name of Student : _____

Course & Semester of student : _____

# CHHATRAPATI SHAHU JI MAHARAJ UNIVERSITY, KANPUR

(Estd.1966)

## Office of the Co-ordinator-Internal Quality Assurance Cell (IQAC)

## PARENTS FEEDBACK FORM

**Parents Information:**

Full Name : Brij Nath Prasad

Address : 119/533 Darshan Purwa

**Fill in the box with the number given below:**

| | | |
|---|---|---|
| 1) | Curricular | 5 |
| 2) | Infrastructure | 4 |
| 3) | Fee Structure | 4 |
| 4) | Teacher-Student relation | 4 |
| 5) | Non-Teaching/Staff-Student relation | 3 |
| 6) | Extra-curricular activity | 5 |
| 7) | Financial aid (fee assistant, scholarship etc.) | 5 |

**5 – Excellent, 4 – Very Good, 3 – Good, 2 – Fair, 1 – Poor**

**Suggestion if any:**

Department is very supportive

Signature of the Parent/Guardian : Brij Nath

Signature :

Name of Student :

Course & Semester of student :

# CHHATRAPATI SHAHU JI MAHARAJ UNIVERSITY, KANPUR

(Estd.1966)

## Office of the Co-ordinator-Internal Quality Assurance Cell (IQAC)

## PARENTS FEEDBACK FORM

**Parents Information:**

Full Name : Chhedi Lal

Address : 27/7 South AB Nagar college Unnao

**Fill in the box with the number given below:**

| | | |
|---|---|---|
| 1) | Curricular | 4 |
| 2) | Infrastructure | 4 |
| 3) | Fee Structure | 3 |
| 4) | Teacher-Student relation | 4 |
| 5) | Non-Teaching/Staff-Student relation | 3 |
| 6) | Extra-curricular activity | 4 |
| 7) | Financial aid (fee assistant, scholarship etc.) | 4 |

**5 – Excellent, 4 – Very Good, 3 – Good, 2 – Fair, 1 – Poor**

**Suggestion if any:**

The department is very good no words to express.

Signature of the Parent/Guardian : Chedi Lal.

Signature :

Name of Student :

Course & Semester of student :

# CHHATRAPATI SHAHU JI MAHARAJ UNIVERSITY, KANPUR

(Estd.1966)

## Office of the Co-ordinator-Internal Quality Assurance Cell (IQAC)

## PARENTS FEEDBACK FORM

**Parents Information:**

Full Name : Mahendra Pati Pal

Address : C-7 Rajeev nagar, Kidwai Nagar Kanpur

**Fill in the box with the number given below:**

| | | |
|---|---|---|
| 1) | Curricular | 4 |
| 2) | Infrastructure | 3 |
| 3) | Fee Structure | 5 |
| 4) | Teacher-Student relation | 4 |
| 5) | Non-Teaching/Staff-Student relation | 4 |
| 6) | Extra-curricular activity | 3 |
| 7) | Financial aid (fee assistant, scholarship etc.) | 3 |

**5 – Excellent, 4 – Very Good, 3 – Good, 2 – Fair, 1 – Poor**

**Suggestion if any:**

Department is very good

Signature of the Parent/Guardian : Mahendra Pati Pal

Signature :

Name of Student :

Course & Semester of student :

# CHHATRAPATI SHAHU JI MAHARAJ UNIVERSITY, KANPUR

(Estd.1966)

## Office of the Co-ordinator-Internal Quality Assurance Cell (IQAC)

## PARENTS FEEDBACK FORM

**Parents Information:**

Full Name : Deepak Srivastava

Address : 2/225 NawabGanj Kanpur.

**Fill in the box with the number given below:**

| | | |
|---|---|---|
| 1) | Curricular | 3 |
| 2) | Infrastructure | 5 |
| 3) | Fee Structure | 3 |
| 4) | Teacher-Student relation | 5 |
| 5) | Non-Teaching/Staff-Student relation | 5 |
| 6) | Extra-curricular activity | 5 |
| 7) | Financial aid (fee assistant, scholarship etc.) | 5 |

**5 – Excellent, 4 – Very Good, 3 – Good, 2 – Fair, 1 – Poor**

**Suggestion if any:**

(1) All teachers are regular. (2) Teachers are very humble with all students. (3) Infrastructure is good, My department is doing great job/teaching.

Signature of the Parent/Guardian : Deepak Srivastava

Signature :

Name of Student :

Course & Semester of student :

# CHHATRAPATI SHAHU JI MAHARAJ UNIVERSITY, KANPUR

(Estd.1966)

## Office of the Co-ordinator-Internal Quality Assurance Cell (IQAC)

## PARENTS FEEDBACK FORM

**Parents Information:**

Full Name : Ved Prakash

Address : Bharhat Bhoosan Colony Gola – Kheri

**Fill in the box with the number given below:**

| | | |
|---|---|---|
| 1) | Curricular | 4 |
| 2) | Infrastructure | 5 |
| 3) | Fee Structure | 4 |
| 4) | Teacher-Student relation | 4 |
| 5) | Non-Teaching/Staff-Student relation | 3 |
| 6) | Extra-curricular activity | 4 |
| 7) | Financial aid (fee assistant, scholarship etc.) | 4 |

**5 – Excellent, 4 – Very Good, 3 – Good, 2 – Fair, 1 – Poor**

**Suggestion if any:**

Department is good.

Signature of the Parent/Guardian : Ved Prakash

Signature : _____

Name of Student : _____

Course & Semester of student : _____

# CHHATRAPATI SHAHU JI MAHARAJ UNIVERSITY, KANPUR

(Estd.1966)

**Office of the Co-ordinator-Internal Quality Assurance Cell (IQAC)**

## PARENTS FEEDBACK FORM

**Parents Information:**

Full Name : Ori Lal

Address : Vill – Harriya Post – Nausar, Lakhimpur

**Fill in the box with the number given below:**

| | | |
|---|---|---|
| 1) | Curricular | 4 |
| 2) | Infrastructure | 4 |
| 3) | Fee Structure | 4 |
| 4) | Teacher-Student relation | 5 |
| 5) | Non-Teaching/Staff-Student relation | 5 |
| 6) | Extra-curricular activity | 4 |
| 7) | Financial aid (fee assistant, scholarship etc.) | 3 |

**5 – Excellent, 4 – Very Good, 3 – Good, 2 – Fair, 1 – Poor**

**Suggestion if any:**

No such suggestions, everything seems fine here.

Signature of the Parent/Guardian : Ori Lal

Signature : _____

Name of Student : _____

Course & Semester of student : _____

# CHHATRAPATI SHAHU JI MAHARAJ UNIVERSITY, KANPUR

(Estd.1966)

## Office of the Co-ordinator-Internal Quality Assurance Cell (IQAC)

## PARENTS FEEDBACK FORM

**Parents Information:**

Full Name : A.K Pandey

Address : PL-83, New Ashok Nagar, Kalyanpur, Kanpur

**Fill in the box with the number given below:**

| | | |
|---|---|---|
| 1) | Curricular | 4 |
| 2) | Infrastructure | 3 |
| 3) | Fee Structure | 2 |
| 4) | Teacher-Student relation | 4 |
| 5) | Non-Teaching/Staff-Student relation | 3 |
| 6) | Extra-curricular activity | 5 |
| 7) | Financial aid (fee assistant, scholarship etc.) | 4 |

**5 – Excellent, 4 – Very Good, 3 – Good, 2 – Fair, 1 – Poor**

**Suggestion if any:**

Department is very supportive, very good facility.

Signature of the Parent/Guardian : A.K. Pandey

Signature :

Name of Student :

Course & Semester of student :

# CHHATRAPATI SHAHU JI MAHARAJ UNIVERSITY, KANPUR

(Estd.1966)

**Office of the Co-ordinator-Internal Quality Assurance Cell (IQAC)**

## PARENTS FEEDBACK FORM

**Parents Information:**

Full Name : Anand Kumar Agarwal

Address : 811-Lakhanpur Housing Society Kanpur

**Fill in the box with the number given below:**

| | | |
|---|---|---|
| 1) | Curricular | 4 |
| 2) | Infrastructure | 3 |
| 3) | Fee Structure | 3 |
| 4) | Teacher-Student relation | 4 |
| 5) | Non-Teaching/Staff-Student relation | 5 |
| 6) | Extra-curricular activity | 4 |
| 7) | Financial aid (fee assistant, scholarship etc.) | 3 |

**5 – Excellent, 4 – Very Good, 3 – Good, 2 – Fair, 1 – Poor**

**Suggestion if any:**

Department is good

Signature of the Parent/Guardian : Anand Kumar Agarwal

Signature : _____

Name of Student : _____

Course & Semester of student : _____

# CHHATRAPATI SHAHU JI MAHARAJ UNIVERSITY, KANPUR

(Estd.1966)

## Office of the Co-ordinator-Internal Quality Assurance Cell (IQAC)

## PARENTS FEEDBACK FORM

**Parents Information:**

Full Name : Ganesh Prasad Gupta

Address : 69/113 Danakhori, Kanpur

**Fill in the box with the number given below:**

| | | |
|---|---|---|
| 1) | Curricular | 4 |
| 2) | Infrastructure | 3 |
| 3) | Fee Structure | 5 |
| 4) | Teacher-Student relation | 4 |
| 5) | Non-Teaching/Staff-Student relation | 4 |
| 6) | Extra-curricular activity | 3 |
| 7) | Financial aid (fee assistant, scholarship etc.) | 5 |

**5 – Excellent, 4 – Very Good, 3 – Good, 2 – Fair, 1 – Poor**

**Suggestion if any:**

Department is amazing.

Signature of the Parent/Guardian : [signature]

Signature : _____

Name of Student : _____

Course & Semester of student : _____

# CHHATRAPATI SHAHU JI MAHARAJ UNIVERSITY, KANPUR

(Estd.1966)

## Office of the Co-ordinator-Internal Quality Assurance Cell (IQAC)

## PARENTS FEEDBACK FORM

**Parents Information:**

Full Name : Abhilesh Kumar Shukla

Address : I-33 MIG World Bank Barra Kanpur

**Fill in the box with the number given below:**

| | | |
|---|---|---|
| 1) | Curricular | 3 |
| 2) | Infrastructure | 4 |
| 3) | Fee Structure | 3 |
| 4) | Teacher-Student relation | 4 |
| 5) | Non-Teaching/Staff-Student relation | 5 |
| 6) | Extra-curricular activity | 3 |
| 7) | Financial aid (fee assistant, scholarship etc.) | 4 |

**5 – Excellent, 4 – Very Good, 3 – Good, 2 – Fair, 1 – Poor**

**Suggestion if any:**

Department is very supportive.

Signature of the Parent/Guardian : Abhilesh Kumar Shukla

Signature : _____

Name of Student : _____

Course & Semester of student : _____

# CHHATRAPATI SHAHU JI MAHARAJ UNIVERSITY, KANPUR

(Estd.1966)

## Office of the Co-ordinator-Internal Quality Assurance Cell (IQAC)

## PARENTS FEEDBACK FORM

**Parents Information:**

Full Name : Babu Lal Gaur

Address : 15 B. Ashok Nagar Kalyanpur, Kanpur

**Fill in the box with the number given below:**

1) Curricular [4]

2) Infrastructure [3]

3) Fee Structure [4]

4) Teacher-Student relation [3]

5) Non-Teaching/Staff-Student relation [4]

6) Extra-curricular activity [4]

7) Financial aid (fee assistant, scholarship etc.) [4]

**5 – Excellent, 4 – Very Good, 3 – Good, 2 – Fair, 1 – Poor**

**Suggestion if any:**

The Department is supporative and helpful. It helps me a lot of in study.

Signature of the Parent/Guardian : Babu Lal Gaur

Signature : _____

Name of Student : _____

Course & Semester of student : _____

# CHHATRAPATI SHAHU JI MAHARAJ UNIVERSITY, KANPUR

(Estd.1966)

**Office of the Co-ordinator-Internal Quality Assurance Cell (IQAC)**

## PARENTS FEEDBACK FORM

**Parents Information:**

Full Name : Suresh Sachan

Address : 124/13 'D' Block Govind Nagar Kanpur

**Fill in the box with the number given below:**

| | | |
|---|---|---|
| 1) | Curricular | 4 |
| 2) | Infrastructure | 3 |
| 3) | Fee Structure | 4 |
| 4) | Teacher-Student relation | 3 |
| 5) | Non-Teaching/Staff-Student relation | 4 |
| 6) | Extra-curricular activity | 4 |
| 7) | Financial aid (fee assistant, scholarship etc.) | 3 |

**5 – Excellent, 4 – Very Good, 3 – ~~Good~~, 2 – Fair, 1 – Poor**

**Suggestion if any:**

The Department is supportive and it should continue as it is doing so.

Signature of the Parent/Guardian : Suresh Sachan

Signature :

Name of Student :

Course & Semester of student :

# CHHATRAPATI SHAHU JI MAHARAJ UNIVERSITY, KANPUR

(Estd.1966)

**Office of the Co-ordinator-Internal Quality Assurance Cell (IQAC)**

## PARENTS FEEDBACK FORM

**Parents Information:**

Full Name : RAM NARESH

Address : VILLAGE + POST - KAKRAHWA BAZAR DIST. SIDDHARTHA NAGAR

**Fill in the box with the number given below:**

| | | |
|---|---|---|
| 1) | Curricular | 3 |
| 2) | Infrastructure | 5 |
| 3) | Fee Structure | 4 |
| 4) | Teacher-Student relation | 4 |
| 5) | Non-Teaching/Staff-Student relation | 5 |
| 6) | Extra-curricular activity | 3 |
| 7) | Financial aid (fee assistant, scholarship etc.) | 3 |

**5 – Excellent, 4 – Very Good, 3 – Good, 2 – Fair, 1 – Poor**

**Suggestion if any:**

IN MY DEPARTMENT, LABS FACILITY ARE GOOD

Signature of the Parent/Guardian : RAM NARESH

Signature : Ram Naresh

Name of Student :

Course & Semester of student :

# CHHATRAPATI SHAHU JI MAHARAJ UNIVERSITY, KANPUR

(Estd.1966)

**Office of the Co-ordinator-Internal Quality Assurance Cell (IQAC)**

## PARENTS FEEDBACK FORM

**Parents Information:**

Full Name : Prabhat Kumar Mishra

Address : 19/52 Ram Narayan Bazar, Kanpur

**Fill in the box with the number given below:**

| | | |
|---|---|---|
| 1) | Curricular | 4 |
| 2) | Infrastructure | 3 |
| 3) | Fee Structure | 3 |
| 4) | Teacher-Student relation | 5 |
| 5) | Non-Teaching/Staff-Student relation | 4 |
| 6) | Extra-curricular activity | 5 |
| 7) | Financial aid (fee assistant, scholarship etc.) | 4 |

**5 – Excellent, 4 – Very Good, 3 – Good, 2 – Fair, 1 – Poor**

**Suggestion if any:**

In my department teacher. student relation is very good. and labs are good.

Signature of the Parent/Guardian : Prabhat

Signature :

Name of Student :

Course & Semester of student :

# CHHATRAPATI SHAHU JI MAHARAJ UNIVERSITY, KANPUR

(Estd.1966)

**Office of the Co-ordinator-Internal Quality Assurance Cell (IQAC)**

## PARENTS FEEDBACK FORM

**Parents Information:**

Full Name : Shree Niwas Dixit

Address : 192-C Arya Nagar Sitapur

**Fill in the box with the number given below:**

| | | |
|---|---|---|
| 1) | Curricular | 4 |
| 2) | Infrastructure | 5 |
| 3) | Fee Structure | 3 |
| 4) | Teacher-Student relation | 4 |
| 5) | Non-Teaching/Staff-Student relation | 5 |
| 6) | Extra-curricular activity | 4 |
| 7) | Financial aid (fee assistant, scholarship etc.) | 4 |

**5 – Excellent, 4 – Very Good, 3 – Good, 2 – Fair, 1 – Poor**

**Suggestion if any:**

Department is very good. Teachers are friendly and Cooperative, Lab facility are very good.

Signature of the Parent/Guardian : Shree Niwas Dixit

Signature :

Name of Student :

Course & Semester of student :

# CHHATRAPATI SHAHU JI MAHARAJ UNIVERSITY, KANPUR

(Estd.1966)

## Office of the Co-ordinator-Internal Quality Assurance Cell (IQAC)

## PARENTS FEEDBACK FORM

**Parents Information:**

Full Name : Umesh Chandra Nigam

Address : 104A/135 Rambagh Kanpur

**Fill in the box with the number given below:**

1) Curricular [3]

2) Infrastructure [4]

3) Fee Structure [4]

4) Teacher-Student relation [3]

5) Non-Teaching/Staff-Student relation [4]

6) Extra-curricular activity [4]

7) Financial aid (fee assistant, scholarship etc.) [3]

**5 – Excellent, 4 – Very Good, 3 – Good, 2 – Fair, 1 – Poor**

**Suggestion if any:**

Our department is good & provide good facilities.

Signature of the Parent/Guardian : Umesh

Signature : _____

Name of Student : _____

Course & Semester of student : _____

# CHHATRAPATI SHAHU JI MAHARAJ UNIVERSITY, KANPUR

(Estd.1966)

## Office of the Co-ordinator-Internal Quality Assurance Cell (IQAC)

## PARENTS FEEDBACK FORM

**Parents Information:**

Full Name : Om Prakash

Address : E-16 Pragati Puram Colony - Rachanali

**Fill in the box with the number given below:**

1) Curricular [4]

2) Infrastructure [4]

3) Fee Structure [3]

4) Teacher-Student relation [5]

5) Non-Teaching/Staff-Student relation [4]

6) Extra-curricular activity [4]

7) Financial aid (fee assistant, scholarship etc.) [3]

**5 – Excellent, 4 – Very Good, 3 – Good, 2 – Fair, 1 – Poor**

**Suggestion if any:**

They ~~Is~~ should take regular exam

Signature of the Parent/Guardian : Prakash

Signature :

Name of Student :

Course & Semester of student :