

INSTITUTE OF AERONAUTICAL ENGINEERING

(Autonomous)

Dundigal, Hyderabad - 500 043, Telangana

END OF THE SEMESTER COURSE EVALUATION FORM

If you need more space to answer any question, feel free to write on the back of the page

Academic Year									
Employee Name									
Employee	· ID								
Program		B.Tech M.Tech MBA							
Department									
Semester		I II III IV V VI VII VIII							
Course Code									
Course Name									
1.Final G	rade Distribution	: - Excellent / Very Good /	Good / Fai	r /					
S.No	Year / Semest	ter Course Name	No. of Appeared	No. of Pass	No. of Failures	% of Pass			
2. Are the course objectives still relevant to this course? If not, how should they be changed? Ans: 3. Are the course outcomes which were defined appropriate to the course? If No, list the outcomes. (a) Yes (b) No									
4. Mention the topics, which required repetition / revision according to the students. Ans:									
5. How well prepared were the students coming into the class? Should the prerequisites be changed? Ans:									
6. How do you intend to modify the course to make it better next time? Ans:									
Date:					Si	ignature of th	e faculty		