

Anjuman-i-Islam's  
AKBAR PERBHOY COLLEGE OF COMMERCE & ECONOMICS

FEEDBACK FORM OF STUDENTS

Co-curricular and Extra-Curricular Activities

Name of the Student: Abdullah Class: \_\_\_\_\_ Div. \_\_\_\_\_ Roll No. 52

Date: 24/08/19 Venue: \_\_\_\_\_

Title of the Program / Course: \_\_\_\_\_

Resource Person: \_\_\_\_\_ Program Coordinator: \_\_\_\_\_

\* Please tick (✓) at the appropriate column.

Sr. No.	Questions	Remark		
		Excellent	Very Good	Good
1.	Overall impact of the program / course.			✓
2.	Effectiveness of the resource person (in knowledge delivery)	✓		
3.	The content of the program		✓	
4.	Level of Interaction			
5.	Opinion about presentation style		✓	
6.	How far course was relevant?			
7.	Use of ICT tools & etc.			✓

Any suggestion (regarding relevance of the program): \_\_\_\_\_

Signature of the Student: Abdullah

Anjuman-i-Islam's  
AKBAR PERBHOY COLLEGE OF COMMERCE & ECONOMICS

FEEDBACK FORM OF STUDENTS

Co-curricular and Extra-Curricular Activities

Name of the Student : Muzaffar Class : F.Y. Bcom-Div. B Roll No. 20

Date : 24/09/18 Venue: \_\_\_\_\_

Title of the Program / Course: \_\_\_\_\_

Resource Person : \_\_\_\_\_  
Program Coordinator: \_\_\_\_\_

\* Please tick (✓) at the appropriate column.

Sr. No.	Questions	Remark		
		Excellent	Very Good	Good
1.	Overall impact of the program / course.			✓
2.	Effectiveness of the resource person (in knowledge delivery)			✓
3.	The content of the program			✓
4.	Level of Interaction		✓	
5.	Opinion about presentation style			✓
6.	How far course was relevant?			✓
7.	Use of ICT tools & etc.			✓

Any suggestion (regarding relevance of the program): \_\_\_\_\_

Signature of the Student: Muzaffar

**Anjuman-Islam's  
AKBAR PERBHOY COLLEGE OF COMMERCE & ECONOMICS**

**FEEDBACK FORM OF STUDENTS**

Co-curricular and Extra-Curricular Activities

Name of the Student : Atif Class : Ey. Bcom Div. B Roll No. 51

Date : 24/09/2018 Venue : \_\_\_\_\_


Title of the Program / Course : Remark

Resource Person : \_\_\_\_\_ Program Coordinator: \_\_\_\_\_

\* Please tick (✓) at the appropriate column.

Sr. No.	Questions	Remark		
		Excellent	Very Good	Good
1.	Overall impact of the program / course.		✓	
2.	Effectiveness of the resource person (in knowledge delivery)		✓	
3.	The content of the program		✓	
4.	Level of Interaction	✓		
5.	Opinion about presentation style		✓	
6.	How far course was relevant?		✓	
7.	Use of ICT tools & etc.		✓	

Any suggestion (regarding relevance of the program): \_\_\_\_\_

Signature of the Student: \_\_\_\_\_  


**Anjuman-i-Islam's  
AKBAR PEERBHAI COLLEGE OF COMMERCE & ECONOMICS**

**FEEDBACK FORM OF STUDENTS**

**Co-curricular and Extra-Curricular Activities**

Name of the Student : Basit Ansari Class : B.F.Y.-B-com Div. B Roll No. 02

Date : 21-09-2018 Venue: \_\_\_\_\_

Title of the Program / Course: \_\_\_\_\_

Resource Person : \_\_\_\_\_  
Program Coordinator: \_\_\_\_\_

\* Please tick (✓) at the appropriate column.

Sr. No.	Questions	Remark		
		Excellent	Very Good	Good
1.	Overall impact of the program / course.	✓		
2.	Effectiveness of the resource person (in knowledge delivery)		✓	
3.	The content of the program	✓		
4.	Level of Interaction	✓		
5.	Opinion about presentation style	✓		
6.	How far course was relevant?		✓	
7.	Use of ICT tools & etc.		✓	

Any suggestion (regarding relevance of the program): \_\_\_\_\_

Signature of the Student: \_\_\_\_\_





**Anjuman-Islam's  
AKBAR PERBHOY COLLEGE OF COMMERCE & ECONOMICS**

**FEEDBACK FORM OF STUDENTS**

**Co-curricular and Extra-Curricular Activities**

Name of the Student : ADRESHI BLUPL Class : F.Y.B.M.Div. Roll No. 34

Date : 24/09/2018 Venue : \_\_\_\_\_

Title of the Program / Course : \_\_\_\_\_

Resource Person : \_\_\_\_\_  
Program Coordinator: \_\_\_\_\_

\* Please tick (✓) at the appropriate column.

Sr. No.	Questions	Remark		
		Excellent	Very Good	Good
1.	Overall impact of the program / course.			✓
2.	Effectiveness of the resource person (in knowledge delivery)	✓		
3.	The content of the program			✓
4.	Level of Interaction	✓		
5.	Opinion about presentation style		✓	
6.	How far course was relevant?	✓		
7.	Use of ICT tools & etc.			✓

Any suggestion (regarding relevance of the program): Sorry I'm not

interested in fashion and design.

Nice thank for coming.

Signature of the Student: \_\_\_\_\_

(Signature)

**Anjuman-i-Islam's  
AKBAR PERBHOY COLLEGE OF COMMERCE & ECONOMICS**

**FEEDBACK FORM OF STUDENTS**

**Co-curricular and Extra-Curricular Activities**

Name of the Student : Kashifa Sayed Class : S.Y. B.Com Div. B Roll No. 56  
 Date : 24/9/2018 Venue : CWDE

Title of the Program / Course : \_\_\_\_\_  
 Resource Person : \_\_\_\_\_  
 Program Coordinator: \_\_\_\_\_

\* Please tick (✓) at the appropriate column.

Sr. No.	Questions	Remark		
		Excellent	Very Good	Good
1.	Overall impact of the program / course.	✓		
2.	Effectiveness of the resource person (in knowledge delivery)		✓	
3.	The content of the program		✓	
4.	Level of Interaction	✓		
5.	Opinion about presentation style	✓		
6.	How far course was relevant?	✓		
7.	Use of ICT tools & etc.	✓		

Any suggestion (regarding relevance of the program): \_\_\_\_\_

Signature of the Student: Kashifa Sayed

Anjuman-i-Islam's  
AKBAR FERBHOY COLLEGE OF COMMERCE & ECONOMICS

FEEDBACK FORM OF STUDENTS

Co-curricular and Extra-Curricular Activities

Name of the Student: Muhammad Class: 54B Div. C Roll No. 86

Date: 24/9/18 Venue: CWDC

Title of the Program / Course: \_\_\_\_\_

Resource Person: \_\_\_\_\_ Program Coordinator: \_\_\_\_\_

\* Please tick (✓) at the appropriate column.

Sr. No.	Questions	Remark		
		Excellent	Very Good	Good
1.	Overall impact of the program / course.	✓	✓	
2.	Effectiveness of the resource person (in knowledge delivery)	✓	✓	
3.	The content of the program	✓		
4.	Level of Interaction	✓	✓	
5.	Opinion about presentation style	✓		
6.	How far course was relevant?		✓	
7.	Use of ICT tools & etc.		✓	

Any suggestion (regarding relevance of the program): NO

Signature of the Student: 

**Anjuman-i-Islam's  
AKBAR PERBHOY COLLEGE OF COMMERCE & ECONOMICS**

**FEEDBACK FORM OF STUDENTS**

**Co-curricular and Extra-Curricular Activities**

Name of the Student : Anson Amroza Class : fy Bcom Div. B Roll No. 06

Date : 24/09/2019 Venue : M.S. A.I. Road

Title of the Program / Course : LEI MARK (INSTITUTE OF ART)

Resource Person : SMITA MAM Program Coordinator: SMT SMITA MAM

\* Please tick (✓) at the appropriate column.

Sr. No.	Questions	Remark		
		Excellent	Very Good	Good
1.	Overall impact of the program / course.		✓	
2.	Effectiveness of the resource person (in knowledge delivery)			✓
3.	The content of the program		✓	
4.	Level of Interaction			✓
5.	Opinion about presentation style		✓	
6.	How far course was relevant?			✓
7.	Use of ICT tools & etc.		✓	

Any suggestion (regarding relevance of the program):

NO

Signature of the Student:

Anjuman



FEEDBACK FORM OF STUDENTS

Co-curricular and Extra-Curricular Activities

Name of the Student : TAI MARIYAM Class : SYBCOM DIV. B Roll No. 83

Date : 24-09-2018 Venue : M.S. ALL ROAD

Title of the Program / Course : LE MARK INSTITUTE OF ART  
Resource Person : SMTA MAM Program Coordinator : SMTA MAM

\* Please tick (✓) at the appropriate column.

Sr. No.	Questions	Remark		
		Excellent	Very Good	Good
1.	Overall impact of the program / course.		✓	
2.	Effectiveness of the resource person (in knowledge delivery)		✓	✓
3.	The content of the program		✓	
4.	Level of Interaction		✓	
5.	Opinion about presentation style		✓	
6.	How far course was relevant?		✓	
7.	Use of ICT tools & etc.			✓

Any suggestion (regarding relevance of the program): NO-

Signature of the Student: [Signature]

**Anjuman-i-Islam's  
AKBAR PERBHOY COLLEGE OF COMMERCE & ECONOMICS**

**FEEDBACK FORM OF STUDENTS**

**Co-curricular and Extra-Curricular Activities**

Name of the Student : Smith Akbar Class : Sy. Com. Div. B Roll No. 58

Date : 22/09/2018 Venue : M.S. Ah Road

Title of the Program / Course : 1<sup>st</sup> mark (INSTITUTE of HR)

Resource Person : SMITAMAM Program Coordinator : SMITAMAM

\* Please tick (✓) at the appropriate column.

Sr. No.	Questions	Remark		
		Excellent	Very Good	Good
1.	Overall impact of the program / course.		✓	
2.	Effectiveness of the resource person (in knowledge delivery)		✓	
3.	The content of the program		✓	
4.	Level of Interaction		✓	
5.	Opinion about presentation style		✓	
6.	How far course was relevant?		✓	
7.	Use of ICT tools & etc.		✓	

Any suggestion (regarding relevance of the program): No

Signature of the Student: Smith Akbar

**Anjuman-i-Islam's  
AKBAR PERBHOY COLLEGE OF COMMERCE & ECONOMICS**

**FEEDBACK FORM OF STUDENTS**

**Co-curricular and Extra-Curricular Activities**

Name of the Student : ANSARI HEENA Class : SyBcom Div. A Roll No. 05

Date : 24/9/18 Venue: \_\_\_\_\_

Title of the Program / Course: \_\_\_\_\_

Resource Person : \_\_\_\_\_  
Program Coordinator: \_\_\_\_\_

\* Please tick (✓) at the appropriate column.

Sr. No.	Questions	Remark		
		Excellent	Very Good	Good
1.	Overall impact of the program / course.		✓	
2.	Effectiveness of the resource person (in knowledge delivery)		✓	
3.	The content of the program		✓	
4.	Level of Interaction		✓	
5.	Opinion about presentation style			✓
6.	How far course was relevant?			✓
7.	Use of ICT tools & etc.	✓		

Any suggestion (regarding relevance of the program): \_\_\_\_\_

Signature of the Student: \_\_\_\_\_

FEEDBACK FORM OF STUDENTS

Co-curricular and Extra-Curricular Activities

Name of the Student : Anson Shahid Class : \_\_\_\_\_ Div. \_\_\_\_\_ Roll No. \_\_\_\_\_

Date : 07/09/10 Venue: \_\_\_\_\_

Title of the Program / Course: \_\_\_\_\_

Resource Person : \_\_\_\_\_ Program Coordinator: \_\_\_\_\_

\* Please tick (✓) at the appropriate column.

Sr. No.	Questions	Remark		
		Excellent	Very Good	Good
1.	Overall impact of the program / course.		✓	
2.	Effectiveness of the resource person (in knowledge delivery)	✓		
3.	The content of the program	✓		
4.	Level of interaction	✓		
5.	Opinion about presentation style	✓		
6.	How far course was relevant?	✓		
7.	Use of ICT tools & etc.	✓		

Any suggestion (regarding relevance of the program): \_\_\_\_\_

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\_\_\_\_\_

Signature of the Student: \_\_\_\_\_



FEEDBACK FORM OF STUDENTS

Co-curricular and Extra-Curricular Activities

Name of the Student : Khan Yasmin Class : Sy. Sec. Div. II Roll No. 79  
Date : 24/9/18 Venue: \_\_\_\_\_

Title of the Program / Course: \_\_\_\_\_  
Resource Person : \_\_\_\_\_  
Program Coordinator: \_\_\_\_\_

\* Please tick (✓) at the appropriate column.

Sr. No.	Questions	Remark		
		Excellent	Very Good	Good
1.	Overall impact of the program / course.		✓	
2.	Effectiveness of the resource person (in knowledge delivery)			✓
3.	The content of the program	✓		
4.	Level of Interaction		✓	
5.	Opinion about presentation style			✓
6.	How far course was relevant?	✓		
7.	Use of ICT tools & etc.		✓	✓

Any suggestion (regarding relevance of the program): \_\_\_\_\_

Signature of the Student: \_\_\_\_\_

FEEDBACK FORM OF STUDENTS

Co-curricular and Extra-Curricular Activities

Name of the Student : Olusur Jemreen Class : ByBMS Div. Roll No. 09

Date : 24-04

Venue : \_\_\_\_\_

Title of the Program / Course : \_\_\_\_\_

Resource Person : \_\_\_\_\_

Program Coordinator : \_\_\_\_\_

\* Please tick (✓) at the appropriate column.

Sr. No.	Questions	Remark			
		Excellent	Very Good	Good	Satisfactory
1.	Overall impact of the program / course.			✓	
2.	Effectiveness of the resource person (in knowledge delivery)		✓		
3.	The content of the program			✓	
4.	Level of Interaction			✓	
5.	Opinion about presentation style		✓		
6.	How far course was relevant?				✓
7.	Use of ICT tools & etc.	✓			

Any suggestion (regarding relevance of the program): \_\_\_\_\_

Signature of the Student: Olusur Jemreen

FEEDBACK FORM OF STUDENTS

Co-curricular and Extra-Curricular Activities

Name of the Student : Shakya Sana Class : SYBMS Div. 52 Roll No. 52

Date : 24/09/2018 Venue: A.P College

Title of the Program / Course: \_\_\_\_\_

Resource Person : \_\_\_\_\_  
Program Coordinator: \_\_\_\_\_

\* Please tick (✓) at the appropriate column.

Sr. No.	Questions	Remark			
		Excellent	Very Good	Good	Satisfactory
1.	Overall impact of the program / course.	✓			
2.	Effectiveness of the resource person (in knowledge delivery)		✓		
3.	The content of the program	—		✓	
4.	Level of Interaction		✓		
5.	Opinion about presentation style	✓			
6.	How far course was relevant?			✓	
7.	Use of ICT tools & etc.	✓			

Any suggestion (regarding relevance of the program): \_\_\_\_\_

Signature of the Student: \_\_\_\_\_

**Anjuman-i-Islam's  
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**FEEDBACK FORM OF STUDENTS**

**Co-curricular and Extra-Curricular Activities**

Name of the Student : Sapna Class : SYBMS Div. Roll No. 12

Date : 24/9/18 Venue: \_\_\_\_\_

Title of the Program / Course: \_\_\_\_\_

Resource Person : \_\_\_\_\_ Program Coordinator: \_\_\_\_\_

\* Please tick (✓) at the appropriate column.

Sr. No.	Questions	Remark		
		Excellent	Very Good	Good
1.	Overall impact of the program / course.			✓
2.	Effectiveness of the resource person (in knowledge delivery)			✓
3.	The content of the program			✓
4.	Level of Interaction			✓
5.	Opinion about presentation style			✓
6.	How far course was relevant?			✓
7.	Use of ICT tools & etc.			✓

Any suggestion (regarding relevance of the program): \_\_\_\_\_

Signature of the Student: \_\_\_\_\_

*(Signature)*



**Anjuman-i-Islam's  
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**FEEDBACK FORM OF STUDENTS**

**Co-curricular and Extra-Curricular Activities**

Name of the Student : Riswan Class : JRBMS Div. 10 Roll No. 10

Date : 24 Venue: \_\_\_\_\_

Title of the Program / Course: \_\_\_\_\_

Resource Person : \_\_\_\_\_ Program Coordinator: \_\_\_\_\_

\* Please tick (✓) at the appropriate column.

Sr. No.	Questions	Remark		
		Excellent	Very Good	Good
1.	Overall impact of the program / course.		✓	
2.	Effectiveness of the resource person (in knowledge delivery)		✓	
3.	The content of the program		✓	
4.	Level of Interaction		✓	
5.	Opinion about presentation style		✓	
6.	How far course was relevant?		✓	
7.	Use of ICT tools & etc.	✓		

Any suggestion (regarding relevance of the program): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
Signature of the Student: \_\_\_\_\_

**Anjuman-i-Islam's  
AKBAR PERBHOY COLLEGE OF COMMERCE & ECONOMICS**

**FEEDBACK FORM OF STUDENTS**

**Co-curricular and Extra-Curricular Activities**

Name of the Student : Sobman Khan Class : F.Y.Bcom Div. B Roll No. 117

Date : 24/9/14

Venue: College

Title of the Program / Course : C.W.D.S

Resource Person : \_\_\_\_\_  
Program Coordinator: \_\_\_\_\_

\* Please tick (✓) at the appropriate column.

Sr. No.	Questions	Remark		
		Excellent	Very Good	Good
1.	Overall impact of the program / course.	✓		
2.	Effectiveness of the resource person (in knowledge delivery)	✓		
3.	The content of the program			
4.	Level of Interaction	✓		
5.	Opinion about presentation style			✓
6.	How far course was relevant?	✓		
7.	Use of ICT tools & etc.			✓

Any suggestion (regarding relevance of the program): \_\_\_\_\_

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\_\_\_\_\_  
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\_\_\_\_\_

Signature of the Student: 

**FEEDBACK FORM OF STUDENTS**

Co-curricular and Extra-Curricular Activities

Name of the Student : Mansoor Ghaffar Class : F.X.B.A. Div. B Roll No. 49

Date : 24/9/18 Venue : college

Title of the Program / Course : C.W.D.S

Resource Person : \_\_\_\_\_  
Program Coordinator: \_\_\_\_\_

\* Please tick (✓) at the appropriate column.

Sr. No.	Questions	Remark		
		Excellent	Very Good	Good
1.	Overall impact of the program / course.		✓	
2.	Effectiveness of the resource person (in knowledge delivery)		✓	
3.	The content of the program	✓		
4.	Level of interaction		✓	
5.	Opinion about presentation style		✓	
6.	How far course was relevant?		✓	
7.	Use of ICT tools & etc.		✓	

Any suggestion (regarding relevance of the program): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Signature of the Student: Ghaffar

**Anjuman-i-Islam's  
AKBAR PERBHOY COLLEGE OF COMMERCE & ECONOMICS**

**FEEDBACK FORM OF STUDENTS**

**Co-curricular and Extra-Curricular Activities**

Name of the Student : Shryya Chauhan Class : M.Com Div. B Roll No. 29

Date : 24-9-18 Venue : College

Title of the Program / Course : C-10 P-5

Resource Person : \_\_\_\_\_ Program Coordinator: \_\_\_\_\_

\* Please tick (✓) at the appropriate column.

Sr. No.	Questions	Remark		
		Excellent	Very Good	Good
1.	Overall impact of the program / course.		✓	
2.	Effectiveness of the resource person (in knowledge delivery)		✓	
3.	The content of the program		✓	
4.	Level of Interaction			
5.	Opinion about presentation style		✓	
6.	How far course was relevant?			✓
7.	Use of ICT tools & etc.			✓

Any suggestion (regarding relevance of the program): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Signature of the Student: Shryya



**Anjuman-i-Islam's  
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**FEEDBACK FORM OF STUDENTS**

**Co-curricular and Extra-Curricular Activities**

Name of the Student : Khan Fouzia Class : FYB Com Div. B Roll No. 44

Date : 24.09.18 Venue : College

Title of the Program / Course : Case study

Resource Person : \_\_\_\_\_ Program Coordinator: \_\_\_\_\_

\* Please tick (✓) at the appropriate column.

Sr. No.	Questions	Remark		
		Excellent	Very Good	Good
1.	Overall impact of the program / course.		✓	
2.	Effectiveness of the resource person (in knowledge delivery)		✓	
3.	The content of the program		✓	
4.	Level of Interaction		✓	
5.	Opinion about presentation style			✓
6.	How far course was relevant?		✓	
7.	Use of ICT tools & etc.		✓	

Any suggestion (regarding relevance of the program): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature of the Student: [Signature]

FEEDBACK FORM OF STUDENTS

Co-curricular and Extra-Curricular Activities

Name of the Student: Uzma K Class: F.Y.B.A Div. B Roll No. 34

Date: 04/09/2018 Venue: College

Title of the Program / Course: C.D.O.V.S

Resource Person: \_\_\_\_\_ Program Coordinator: \_\_\_\_\_

\* Please tick (✓) at the appropriate column.

Sr. No.	Questions	Remark		
		Excellent	Very Good	Good
1.	Overall impact of the program / course.		✓	
2.	Effectiveness of the resource person (in knowledge delivery)		✓	
3.	The content of the program		✓	
4.	Level of Interaction		✓	
5.	Opinion about presentation style		✓	
6.	How far course was relevant?			✓
7.	Use of ICT tools & etc.		✓	

Any suggestion (regarding relevance of the program): \_\_\_\_\_

Signature of the Student: Uzma K

**FEEDBACK FORM OF STUDENTS**

Co-curricular and Extra-Curricular Activities

Name of the Student : Khushboo Class : SYBMS Div. 56 Roll No. 56

Date : 24/9/18 Venue: \_\_\_\_\_

Title of the Program / Course: \_\_\_\_\_

Resource Person : \_\_\_\_\_ Program Coordinator: \_\_\_\_\_

\* Please tick (✓) at the appropriate column.

Sr. No.	Questions	Remark		
		Excellent	Very Good	Good
1.	Overall impact of the program / course.			✓
2.	Effectiveness of the resource person (in knowledge delivery)			✓
3.	The content of the program			✓
4.	Level of Interaction			✓
5.	Opinion about presentation style			✓
6.	How far course was relevant?			✓
7.	Use of ICT tools & etc.			✓

Any suggestion (regarding relevance of the program): \_\_\_\_\_

Signature of the Student: \_\_\_\_\_

*(Handwritten Signature)*

FEEDBACK FORM OF STUDENTS

Co-curricular and Extra-Curricular Activities

Name of the Student : SAD AWAZ Class : F.Y.B (com) Div. B Roll No. 59

Date : 24/09/18 Venue : College

Title of the Program / Course : Le Marks Institute of Prof.

Resource Person : \_\_\_\_\_ Program Coordinator: \_\_\_\_\_

\* Please tick (✓) at the appropriate column.

Sr. No.	Questions	Remark		
		Excellent	Very Good	Good
1.	Overall impact of the program / course.	✓		
2.	Effectiveness of the resource person (in knowledge delivery)	✓		
3.	The content of the program		✓	
4.	Level of Interaction		✓	
5.	Opinion about presentation style			✓
6.	How far course was relevant?			✓
7.	Use of ICT tools & etc.	✓		

Any suggestion (regarding relevance of the program): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
Signature of the Student: \_\_\_\_\_



FEEDBACK FORM OF STUDENTS

Co-curricular and Extra-Curricular Activities

Name of the Student : Luftman Class : F-V. B.Com F Div. F Roll No. 1114

Date : 24/9/18 Venue : Room 13

Title of the Program / Course : Designing & stuff

Resource Person : \_\_\_\_\_ Program Coordinator: \_\_\_\_\_

\* Please tick (✓) at the appropriate column.

Sr. No.	Questions	Remark		
		Excellent	Very Good	Good
1.	Overall impact of the program / course.	✓		
2.	Effectiveness of the resource person (in knowledge delivery)		✓	
3.	The content of the program	✓		
4.	Level of Interaction		✓	
5.	Opinion about presentation style		✓	
6.	How far course was relevant?			✓
7.	Use of ICT tools & etc.			✓

Any suggestion (regarding relevance of the program): WOT Really but skill it affects me

Signature of the Student: [Signature]

FEEDBACK FORM OF STUDENTS

Co-curricular and Extra-Curricular Activities

Name of the Student : Qureshi Sabiha . Class : F-V. Bcom Div. A Roll No. 55

Date : 24/9/18 Venue : A.P. College

Title of the Program / Course : Remark Institute of Art

Resource Person : \_\_\_\_\_ Program Coordinator: \_\_\_\_\_

\* Please tick (✓) at the appropriate column.

Sr. No.	Questions	Remark		
		Excellent	Very Good	Good
1.	Overall impact of the program / course.		✓	
2.	Effectiveness of the resource person (in knowledge delivery)		✓	
3.	The content of the program	✓		
4.	Level of interaction	✓		
5.	Opinion about presentation style		✓	
6.	How far course was relevant?	✓		
7.	Use of ICT tools & etc.	✓		

Any suggestion (regarding relevance of the program): \_\_\_\_\_

Signature of the Student: \_\_\_\_\_

*[Handwritten Signature]*

**Anjuman-i-Islam's  
AKBAR PERBHOY COLLEGE OF COMMERCE & ECONOMICS**

**FEEDBACK FORM OF STUDENTS**

**Co-curricular and Extra-Curricular Activities**

Name of the Student : KHAN AMINA Class : fy. B.com Div. A Roll No. 119

Date : 21/10/18 Venue : A.P college

Title of the Program / Course : \_\_\_\_\_

Resource Person : \_\_\_\_\_  
Program Coordinator: \_\_\_\_\_

\* Please tick (✓) at the appropriate column.

Sr. No.	Questions	Remark			
		Excellent	Very Good	Good	Satisfactory
1.	Overall impact of the program / course.		✓		
2.	Effectiveness of the resource person (in knowledge delivery)		✓		
3.	The content of the program				
4.	Level of Interaction	✓			
5.	Opinion about presentation style	✓			
6.	How far course was relevant?				
7.	Use of ICT tools & etc.	✓			

Any suggestion (regarding relevance of the program): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Signature of the Student: Amina

**Anjuman-i-Islam's  
AKBAR PERBHOY COLLEGE OF COMMERCE & ECONOMICS**

**FEEDBACK FORM OF STUDENTS**

**Co-curricular and Extra-Curricular Activities**

Name of the Student : SHARH ALYAH Class : F.Y.B.COM Div. B Roll No. 37

Date : 24/09/2018 Venue : \_\_\_\_\_

Title of the Program / Course : \_\_\_\_\_

Resource Person : \_\_\_\_\_  
Program Coordinator: \_\_\_\_\_

\* Please tick (✓) at the appropriate column.

Sr. No.	Questions	Remark		
		Excellent	Very Good	Good
1.	Overall impact of the program / course.	✓		
2.	Effectiveness of the resource person (in knowledge delivery)		✓	
3.	The content of the program		✓	
4.	Level of Interaction	✓		
5.	Opinion about presentation style		✓	
6.	How far course was relevant?			✓
7.	Use of ICT tools & etc.	✓		

Any suggestion (regarding relevance of the program): \_\_\_\_\_

Signature of the Student: [Signature]



FEEDBACK FORM OF STUDENTS

Co-curricular and Extra-Curricular Activities

Name of the Student : Shaikh Heena Class : S-1-B<sub>com</sub> Div. C Roll No. 42  
Date : 24/09/2018 Venue : CWDC

Title of the Program / Course : \_\_\_\_\_  
Resource Person : \_\_\_\_\_  
Program Coordinator : \_\_\_\_\_

\* Please tick (✓) at the appropriate column.

Sr. No.	Questions	Remark		
		Excellent	Very Good	Good
1.	Overall impact of the program / course.		✓	
2.	Effectiveness of the resource person (in knowledge delivery)		✓	
3.	The content of the program		✓	
4.	Level of Interaction		✓	
5.	Opinion about presentation style		✓	
6.	How far course was relevant?		✓	
7.	Use of ICT tools & etc.		✓	

Any suggestion (regarding relevance of the program): No

Signature of the Student: Heena

**Anjuman-i-Islam's  
AKBAR PERBHOY COLLEGE OF COMMERCE & ECONOMICS**

**FEEDBACK FORM OF STUDENTS**

**Co-curricular and Extra-Curricular Activities**

Name of the Student : Boot Akhya Class : SYBcom Div. A Roll No. 14

Date : 24/09/2018 Venue : CWC

Title of the Program / Course : 1. Designing

Resource Person : \_\_\_\_\_  
Program Coordinator: \_\_\_\_\_

\* Please tick (✓) at the appropriate column.

Sr. No.	Questions	Remark		
		Excellent	Very Good	Good
1.	Overall impact of the program / course.	✓		
2.	Effectiveness of the resource person (in knowledge delivery)		✓	
3.	The content of the program		✓	
4.	Level of Interaction	✓		
5.	Opinion about presentation style	✓		
6.	How far course was relevant?			✓
7.	Use of ICT tools & etc.			✓

Any suggestion (regarding relevance of the program): NO

Signature of the Student: 

Anjuman-t-Islam's  
AKBAR PERBHOY COLLEGE OF COMMERCE & ECONOMICS

FEEDBACK FORM OF STUDENTS

Co-curricular and Extra-Curricular Activities

Name of the Student : Roohi . Manan Class : 12B.com Div. A Roll No. 57  
 Date : 24.09.18 Venue : AP college

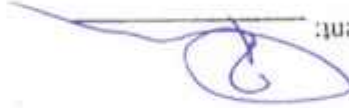
Title of the Program / Course : \_\_\_\_\_  
 Resource Person : \_\_\_\_\_  
 Program Coordinator: \_\_\_\_\_

\* Please tick (✓) at the appropriate column.

Sr. No.	Questions	Remark			
		Excellent	Very Good	Good	Satisfactory
1.	Overall impact of the program / course.			✓	
2.	Effectiveness of the resource person (in knowledge delivery)				✓
3.	The content of the program				
4.	Level of interaction			✓	
5.	Opinion about presentation style		✓		
6.	How far course was relevant?				✓
7.	Use of ICT tools & etc.			✓	

Any suggestion (regarding relevance of the program): Fill the form

in next few days.

Signature of the Student: 

**Anjuman-i-Islam's  
AKBAR PERBHOY COLLEGE OF COMMERCE & ECONOMICS**

**FEEDBACK FORM OF STUDENTS**

**Co-curricular and Extra-Curricular Activities**

Name of the Student : Shahid Sohel Class : EVBCOM Div. B Roll No. 54

Date : 24/09/2018 Venue: \_\_\_\_\_

Title of the Program / Course: \_\_\_\_\_

Resource Person : \_\_\_\_\_  
Program Coordinator: \_\_\_\_\_

\* Please tick (✓) at the appropriate column.

Sr. No.	Questions	Remark		
		Excellent	Very Good	Good
1.	Overall impact of the program / course.	✓		
2.	Effectiveness of the resource person (in knowledge delivery)		✓	
3.	The content of the program	✓		
4.	Level of interaction			✓
5.	Opinion about presentation style	✓		
6.	How far course was relevant?			✓
7.	Use of ICT tools & etc.	✓		

Any suggestion (regarding relevance of the program): \_\_\_\_\_

Signature of the Student: Shahid Sohel



**Anjuman-i-Islam's  
AKBAR PERBHOY COLLEGE OF COMMERCE & ECONOMICS**

**FEEDBACK FORM OF STUDENTS**

**Co-curricular and Extra-Curricular Activities**

Name of the Student : ANSARUDDIN GUBHAN Class : F.Y.B.com Div. B Roll No. 22

Date : 24-09-22 Venue: \_\_\_\_\_

Title of the Program / Course : \_\_\_\_\_

Resource Person : \_\_\_\_\_  
Program Coordinator: \_\_\_\_\_

\* Please tick (✓) at the appropriate column.

Sr. No.	Questions	Remark		
		Excellent	Very Good	Good
1.	Overall impact of the program / course.	✓		
2.	Effectiveness of the resource person (in knowledge delivery)		✓	
3.	The content of the program		✓	
4.	Level of Interaction		✓	
5.	Opinion about presentation style			✓
6.	How far course was relevant?	✓		
7.	Use of ICT tools & etc.	✓		

Any suggestion (regarding relevance of the program): \_\_\_\_\_

Signature of the Student: \_\_\_\_\_

**Anjuman-i-Islam's  
AKBAR PERBHOY COLLEGE OF COMMERCE & ECONOMICS**

**FEEDBACK FORM OF STUDENTS**

**Co-curricular and Extra-Curricular Activities**

Name of the Student : SK Faraz Class : F.Y.B. Com Div. B Roll No. 48

Date : 24-09-2018 Venue : AFIS

Title of the Program / Course : \_\_\_\_\_

Resource Person : \_\_\_\_\_ Program Coordinator: \_\_\_\_\_

\* Please tick (✓) at the appropriate column.

Sr. No.	Questions	Remark			
		Excellent	Very Good	Good	Satisfactory
1.	Overall impact of the program / course.	✓			
2.	Effectiveness of the resource person (in knowledge delivery)		✓		
3.	The content of the program		✓		
4.	Level of Interaction			✓	
5.	Opinion about presentation style			✓	
6.	How far course was relevant?		✓		
7.	Use of ICT tools & etc.				✓

Any suggestion (regarding relevance of the program): \_\_\_\_\_

Signature of the Student: Faraz