

D C Model Sr Sec School

FEEDBACK FORM

(Date.....)

Name _____

E mail id _____

Address: _____

Phone: _____

On a scale of 1 to 5, Pls give your Feedback about our school website.

- 5 – Excellent
- 4 – Very Good
- 3 – Good
- 2 – Fair
- 1 - Unsatisfactory

- 1. Information – How well was the system of school able to cover all the aspects you wanted to know.**

1	2	3	4	5
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- 2. Presentation – How much the presentations of the faculty members get succeeded in keeping you interested in our institute**

1	2	3	4	5
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- 3. Understanding of your ward, on the use and integration of the devices in the class room teaching**

1	2	3	4	5
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- 4. your comments and suggestion are always welcome! Your feedback will help us serve you better!**

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Signature