# VEER SURENDRA SAI UNIVERSITY OF TECHNOLOGY, BURLA

### **Calculation of Credit Points**

Name	
Present Position	
Academic Year	
Teaching Process	
Assessment Year (Date to Date)	

A. Teaching Process (Max Point 25) (Enclosure should be counter signed by the HOD)

SI	Semester	Course	No. of	No. of	Points	Enclosure
No.		Code/Name	Scheduled	actually	earned	No.
			Classes	held classes		
	1 <sup>st</sup>					
	2 <sup>nd</sup>					
	3 <sup>rd</sup>					
	4 <sup>th</sup>					
	5 <sup>th</sup>					
	6 <sup>th</sup>					

B. Students' Feedback (Max Point25) (To be submitted by concern HOD, if HOD is a candidate then this should be submitted by Dean F&P)

SI No.	Semester	Course Code/Name	Average Student feedback on the scale of 25	Enclosure No.
	1 <sup>st</sup>			
	2 <sup>nd</sup>			
	3 <sup>rd</sup>			
	4 <sup>th</sup>			
	5 <sup>th</sup>			
	6 <sup>th</sup>			

C. Departmental Activities (Max credit 20) (Enclosure should be signed by the HOD)

SI No.	Semester	Activity	Credit/Point	Criteria	Enclosure No.
	1 <sup>st</sup>				
	2 <sup>nd</sup>				
	3 <sup>rd</sup>				
	4 <sup>th</sup>				
	5 <sup>th</sup>				
	6 <sup>th</sup>				

D. Institute Activities (Max Credit 10)( Enclosure should be signed by the Registrar/Dean F&P)

SI No.	Semester	Activity	Credit/Point	Criteria	Enclosure No.
	1 <sup>st</sup>				
	2 <sup>nd</sup>				
	3 <sup>rd</sup>				
	4 <sup>th</sup>				
	5 <sup>th</sup>				
	6 <sup>th</sup>				

## E. ACR maintained at institute level (Max Credit 10) (To be submitted by PA to VC)

Extraordinary	Excellent	Very Good	Good	Satisfactory

SI No.	Year	Activity	Credit/Point	Criteria	Enclosure No.

## F. Contribution to Society (Max Credit 10) (Enclosure should be signed by competent authority)

SI No.	Semester	Activity	Credit/Point	Criteria	Enclosure No.
	1 <sup>st</sup>				
	2 <sup>nd</sup>				
	3 <sup>rd</sup>				
	4 <sup>th</sup>				
	5 <sup>th</sup>				
	6 <sup>th</sup>				

### Summary (To be filled by the Scrutiny Committee)

Summary	Academic Year	Academic Year	Academic Year
	1	2	3
A.Teaching Process (Max Points 25)			
B.Students' feedback (Max Points 25)			
C.Departmental Activities (Max Points 20)			
D.Institute Activities (Max Points 10)			
E.ACR (Max Point 10)			
F.Contribution to Society (Max Points 10)			
Total (Max Points 100)			
Total on 10 Point Scale			

#### STUDENT'S FEEDBACK FORM

Academic Year	Name of the Fac	culty
Course	Semester	
	Date of the feed	lback

## For getting filled in through student

SI	Description	Very	Poor	Good	Very	Excellent
No.		Poor			Good	
		1	2	3	4	5
1	Has the Teacher covered entire syllabus as					
	prescribed by University/College/Board?					
2	Has the Teacher covered relevant topics beyond					
	syllabus					
3	Effectiveness of Teacher in terms of :					
	(a)Technical content/course content					
	(b)Communication Skills					
	(c)Use of teaching aids					
4	Pace on which contents were covered					
5	Motivation and inspiration for students to learn					
6	Support for the development of Students' skill					
	(i)Practical demonstration					
	(ii)Hands on training					
7	Clarity of expectations of students					
8	Feedback provided on Student's progress					
9	Willingness to offer help and advice to students					
	Total					

Signature of the Head of the Department