



Pravara Rural Education Society's
Sir Visvesvaraya Institute of Technology, Chincholi, Nashik

Phone: 02551-271278 Fax: 02551-271277

Cell: 9922911521 Email: tpc.svit@pravara.in suhas.londhe@pravara.in

www.svitnashik.in www.pravara.in



(Approved by AICTE, New Delhi and affiliated to Savitribai Phule University of Pune)

PARENTS MEET FEEDBACK FORM

Please Mark Yes or No accordingly

Questions	Yes	No
Are you aware about your ward's attendance in the college?	✓	
Are you satisfied with your ward's academic performance at present?	✓	
Are you aware about Teaching-Learning process in the college?	✓	
Are you receiving the message from college in case of absence of your ward?		✓
Are you interested in providing help for placement, project, and internship for students? If yes please mention it.-----		
Have you visited the Institute website? (www.svitnashik.in)	✓	
Are you aware of Vision and Mission of the Institute/Department?	✓	
Are you aware of the Co-and Extra Curricular Activities conducted by the Institute/Department?	✓	
Parent Teacher Meet Should be organized every Year?	✓	

Please Mark in Suitable Columns	Excellent	Very good	Good	Satisfactory	Poor
Rate the Quality of teaching offered by the college	✓				
Student discipline maintained by the college		✓			
Internet Facility		✓			
Hostel & Mess /Bus facility			✓		
Sports Facilities in college		✓			
Library Facility		✓			
Canteen Facility		✓			
Student counseling and Guidance facility in the college		✓			
Technical knowledge and communication skills acquired by your ward after taking admission to our college		✓			
Rate the department of your ward	✓				

Please Give your valuable suggestions for improvement of Institute

Name of Student: Amor S. Shelar Class and Department: B.E. Chemical

Name of Parent: Sanjay V. Shelar Occupation: Worker

Contact No.: 9665451565 E Mail: sanjayshelar144@gmail.com

SV Shelar
Parent Signature



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Are you satisfied with your ward's academic performance at present?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Are you aware about Teaching-Learning process in the college?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Are you receiving the message from college in case of absence of your ward?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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Are you aware of the Co-and Extra Curricular Activities conducted by the Institute/Department?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Parent Teacher Meet Should be organized every Year?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Please Mark in Suitable Columns	Excellent	Very good	Good	Satisfactory	Poor
Rate the Quality of teaching offered by the college	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student discipline maintained by the college	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Internet Facility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Hostel & Mess /Bus facility	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sports Facilities in college	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Library Facility	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Canteen Facility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Student counseling and Guidance facility in the college	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Technical knowledge and communication skills required by your ward after taking admission to our college	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rate the department of your ward	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please Give your valuable suggestions for improvement of Institute

Name of Student: Shelke Vishal P

Class and Department: TE Computer

Name of Parent: Shelke Pandaraoath

Occupation: FARMER

Contact No.: 9421465227

E Mail:

SWR
Principal

42114
Parent Signature



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Are you aware of Vision and Mission of the Institute/Department?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Are you aware of the Co-and Extra Curricular Activities conducted by the Institute/Department?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Parent Teacher Meet Should be organized every Year?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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Rate the Quality of teaching offered by the college	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student discipline maintained by the college	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Internet Facility	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hostel & Mess /Bus facility	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Technical knowledge and communication skills acquired by your ward after taking admission to our college	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rate the department of your ward	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please Give your valuable suggestions for improvement of Institute

Name of Student: Kangane Savitri P-Class and Department: S.E. CElectrical)

Name of Parent: Kangane Pandurang Occupation: Farmer

Contact No.: 7028932959

E Mail: Savitrikangane1@gmail.com

पं. द. कांगणे

Parent Signature



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Are you aware of the Co-and Extra Curricular Activities conducted by the Institute/Department?		✓
Parent Teacher Meet Should be organized every Year?	✓	

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Student counseling and Guidance facility in the college		✓			
Technical knowledge and communication skills acquired by your ward after taking admission to our college		✓			
Rate the department of your ward		✓			

Please Give your valuable suggestions for improvement of Institute

Name of Student: *Morankar Manish* Class and Department: *BE - ETEC*

Name of Parent: *Ramesh Morankar* Occupation: *Nashik*

Contact No.: *8485077087*

E Mail: *morankarmanish96@gmail.com*

Ramesh
Parent Signature



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Student discipline maintained by the college		✓			
Internet Facility		✓			
Hostel & Mess /Bus facility		✓			
Sports Facilities in college	✓				
Library Facility		✓			
Canteen Facility			✓		
Student counseling and Guidance facility in the college	✓				
Technical knowledge and communication skills acquired by your ward after taking admission to our college		✓			
Rate the department of your ward		✓			

Please Give your valuable suggestions for improvement of Institute

Name of Student: Yashashri M. Kulkarni Class and Department: BE (IT)

Name of Parent: Mahendra Balwant Occupation: Worker

Contact No.: Kulkarni
7038965802

E Mail: yashashrikulkarni55@gmail.com

M. Kulkarni
Parent Signature



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Student discipline maintained by the college	✓				
Internet Facility	✓				
Hostel & Mess /Bus facility	✓				
Sports Facilities in college	✓				
Library Facility	✓				
Canteen Facility	✓				
Student counseling and Guidance facility in the college	✓				
Technical knowledge and communication skills acquired by your ward after taking admission to our college	✓				
Rate the department of your ward	✓				

Please Give your valuable suggestions for improvement of Institute

Name of Student: Muthal Akash D. Class and Department: SE (mech)

Name of Parent: Dnyaneshwar Occupation: Farmare

Contact No.: 9604841385 E Mail: —

Dnyaneshwar
 Parent Signature



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Student discipline maintained by the college				<input checked="" type="checkbox"/>	
Internet Facility				<input checked="" type="checkbox"/>	
Hostel & Mess /Bus facility	<input checked="" type="checkbox"/>				
Sports Facilities in college		<input checked="" type="checkbox"/>			
Library Facility		<input checked="" type="checkbox"/>			
Canteen Facility	<input checked="" type="checkbox"/>				
Student counseling and Guidance facility in the college				<input checked="" type="checkbox"/>	
Technical knowledge and communication skills acquired by your ward after taking admission to our college		<input checked="" type="checkbox"/>			
Rate the department of your ward		<input checked="" type="checkbox"/>			

Please Give your valuable suggestions for improvement of Institute

Name of Student: Vilas Patange Class and Department: 2 year MBA

Name of Parent: Sakharam Patange Occupation: worker

Contact No.: 9823838495 E Mail:

Parent Signature