## PROFESSIONALS FEEDBACK ON CURRICULUM

Name *                              [Name]

Degree: *                           ----Select Degree----

Program: *                          ----Select Program----

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| 1 | How pertinent do you think the courses are, in view of the BDS & MDS program? | ○ Excellent ○ Good ○ Fair ○ Poor |
| 2 | How would you rank the essential details provided about each program's curriculum on the college website? | ○ Excellent ○ Good ○ Fair ○ Poor |
| 3 | How do you rank the accomplishment of the courses related to profession that are included in the program? | ○ Excellent ○ Good ○ Fair ○ Poor |
| 4 | How would you rank the courses in terms of additional learning or self-learning, In light of the course design? | ○ Excellent ○ Good ○ Fair ○ Poor |
| 5 | How do you evaluate the value-added and certificate courses that are offered, In terms of career growth? | ○ Excellent ○ Good ○ Fair ○ Poor |
| 6 | How much do you think the courses contribute to the development of skills and attitudes as well as understanding and acceptance of the program? | ○ Excellent ○ Good ○ Fair ○ Poor |
| 7 | How relevant do you think the courses are, In terms of general skills, practice management, patient care, diagnosis, and treatment planning? | ○ Excellent ○ Good ○ Fair ○ Poor |
| 8 | How would you rank the appropriate updating of the curriculum to meet professional requirements in the syllabus and curriculum? | ○ Excellent ○ Good ○ Fair ○ Poor |
| 9 | How would you rank the institution overall for providing a standard curriculum? | ○ Excellent ○ Good ○ Fair ○ Poor |
| 10 | How would you rank the flexibility of the curriculum in both online and offline modes? | ○ Excellent ○ Good ○ Fair ○ Poor |

Any Other Comments:

[                    ]

[ Submit ]