B.S/A.D Program wise Faculty Course Review Summary Report

Program Team Members (PTM) of each BS/A. D program are required to collect all the filled Faculty Course Evaluation Reports from faculty members and compile the results in the following table. If any faculty member recommended/ suggested any major changes in below column no. (07) then Focal Person should write a one or two pages report on major changes by faculty members and signed the report by himself/herself as well as by the college Principal and send to concerned authority in university while keeping in copy QAC, HED office.

College's Name:

Department/Program Name:

1	3	4	5	6	7	
Semester	Course Code	Course Name	Teacher's Name	Report Submission (Yes/No)	Recommendations/ Suggestions (Yes/No)	
Ist/2 nd						
ord (4.1			_			
3 rd /4th						
5 th /6th						
<i>3</i> / 0th						
7 th /8th						
Name:		Date:				
		(Focal Person)				
Name:		,				
		Date:				
		(Head of Department)				
Name:		Date:				