PINE GROVE COLLEGE OF EDUCATION

Teacher feedback proforma

BLANK FORM | Not a record of responses collected

Academic session: _____ Date: _____
Name (optional): _____
Programme / role: _____

Rate each item from 1 to 5: 1 Poor, 2 Fair, 3 Satisfactory, 4 Good, 5 Excellent. Use N/A if you cannot assess it.

Feedback item	Rating / N/A
1. Relevance of curriculum to teacher education	
2. Scope for participatory teaching methods	
3. Availability of teaching and ICT resources	
4. Support for academic planning	
5. Opportunities for professional development	
6. Support for research and scholarly work	
7. Coordination of practice teaching	
8. Effectiveness of academic administration	

What worked well?

What should improve?

Submit the completed form to the college office. Personal identification is optional.