



राज्य होटल प्रबंधन, खान पान प्रौद्योगिकी एवं
पोषाहार संस्थान, नई दिल्ली

State Institute of Hotel Management, Catering Technology
& Applied Nutrition, New Tehri

अतुल्य! भारत
Incredible India

FEEDBACK FORM ON INFRASTRUCTURE AND FACILITIES

As part of Continuous Quality Improvement, your feedback is valuable as it helps us to develop and improve our standards on facilities and services.

1. Name of the student (Optional) : _____

2. Registered Number (Optional) : _____

3. Year of graduation : _____

4. Branch : _____

5. E-Mail ID & Contact No. : _____

6. Please give a rating of your course on the following:-

Where 5: Excellent, 4: Very Good, 3: Good, 2: Average, 1: Poor

INFRASTRUCTURE AND FACILITIES			
S.No	Facility	Feedback	Remarks
1.	<i>Class Room</i>		
a.	PC & Projectors		
b.	Cleanliness		
2.	<i>Computer Labs</i>		
a.	No. of Computers/ Connectivity/ Anti-Virus		
b.	Availability of Software/ Maintenance		
3.	<i>Wi-Fi and Internet Facility</i>		
a.	Accessibility of Wi-Fi & Net Speed		
4.	<i>Canteen</i>		
a.	Food Prices/ Quantity/ Hygienic Food		
b.	Service		
c.	Timings		
d.	Adequate sitting arrangement		
5.	<i>Washroom & Drinking water</i>		
a.	Cleanliness/ Lighting of Washroom all the time		
b.	Quality of drinking Water		
6.	<i>Extra-Curricular activities</i>		
a.	Availability of free time for extra-curricular activities		
b.	Enough space available to play sports in college		
	<i>Gym</i>		
a.	Availability of Gym equipments/ Gym Instructor		

b.	Timings		
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INFRASTRUCTURE AND FACILITIES			
S.No	Facility	Feedback	Remarks
7.	<i>Mentoring System</i>		
a.	Regularity in counseling		
b.	Motivation to the students to participate in Co-curricular and Extra- curricular activities.		
8.	<i>Library</i>		
a.	Availability of books/Journals		
b.	Utilizing Digital Library		
c.	Timings		
9.	<i>Medical</i>		
a.	Availability of Doctor and Medicines/ Timings		
10.	<i>Transportation</i>		
a.	Availability of busses in all routes		
b.	Availability of seating in busses		
c.	Timings		
11.	<i>Bank & ATM</i>		
12.	HOSTEL		
a.	Availability of water/ Wi-Fi/food		
b.	Cleanliness		
c.	Timings		
13.	Overall Impression on the Institution		

Any other suggestions for improvement: _____

Signature

*****Thank you for your participation and completing this feedback form *****

