

Committed to developing "Conscientious, Confident & Caring quality nursing professionals" MAHARSHI KARVE STREE SHIKSHAN SAMSTHA'S

Smt. Bakul Tambat Institute of Nursing Education

(Affiliated to MSBNPE, MNC, MUHS & INC, NAAC Accredited)



1.4.1

Sample feedback form of stake holder

STUDENT'S FEEDBACK (2023-2024)

Make a tick (√) mark in the appropriate cell * Indicates required question Name of Student (Ms./Mrs.) * Ms Priti Vasudeo Dawange Contact Number * 9309057388 Course * O ANM O GNM B.Sc. (N) P.B.B.Sc. (N) MSc (N) O PhD (N) Year of course * 1st 2nd 3rd 4th If BSc (N), please mention Semester

Please rate us *

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
Getting admission in the institute is a matter of pride for me	0	•	0	0	0
I have great respect to the institute as it is member institute of the trust founded by Maharshi Karve	•	0		0	0
The admission process in the institute is smooth & transparent	0	•	0	0	0
I am improving in my knowledge, attitude & skills on nursing tremendously	0	•	0	0	0
Discipline here is very good.	•	0	0	0	0
The curriculum is very well planned and implemented appropriately	0	•	0	0	0
All the teaching and learning activities are clear and student friendly.	•	0	0	0	0

The faculty is experienced and approachable.	•	0	0	0	0
We receive value based education for our overall growth.	•	0	0	0	0
There is good library facility with net connection.	•	0	0	0	0
The transport to clinical areas is good and timely.	0	0	•	0	0
Our website is very informative and regularly updated.	0	•	0	0	0
Good, safe and adequate hostel and mess facilities are made available	•	0	0	0	0
Regular counseling of the student and parents is made available.	0	•	0	0	0
We are encouraged for co-curricular activities	•	0	0	0	0
Scholarships are provided to needy students	•	0	0	0	0

Campus is safe and secure	•	0	0	0	0
A sense of social service is inculcated in me.	0	•	0	0	0
There is an upward education mobility for me in the institute till Ph.D (N)	0	•	0	0	0
I am aware that the Institute's passed out students are placed well in job market.	•	0	0	0	0

Any Suggestions *

Classrooms should be clean atleast once a week. Our days scholars should be provided with specific place to have their lunch

PARENT'S FEEDBACK (2023-2024)

Make a tick (\checkmark) mark in the appropriate cell

* Indicates required question
Name of parent *
Shalini Anil Ghag
Contact Number *
9881630504
Name of Student (Ms./ Mrs.) *
Ms. Yogita Anil Ghag
Course *
○ ANM
GNM
B.Sc. (N)
P.B.B.Sc. (N)
○ MSc (N)
PhD (N)
Year of course *
○ 1st
2nd
○ 3rd
○ 4th
If BSc (N), please mention Semester
○ I
○ II
III
○ IV

Please rate us *

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
Getting admission in the institute for my ward is a matter of pride for me	0	•	0	0	0
I have great respect to the institute as it is member institute of the trust founded by Maharshi Karve.	0	•	0	0	0
The admission process in the institute was smooth & transparent	0	•	0	0	0
My ward has improved her knowledge, attitude & skills on nursing tremendously	0	•	0	0	0
Discipline here is very good.	0	•	0	0	0
The curriculum is very well planned and implemented appropriately	0	0	0	•	0
All the teaching and learning activities are clear and student friendly.	0	0	•	0	0
The faculty is experienced and approachable.	0	•	0	0	0

Good, safe and adequate hostel and mess facilities are made available	0	0	0	•	0
Regular counseling of the student and parents is made available.	0	0	•	0	0
Encourages my ward for co- curricular activities	0	•	0	0	0
Scholarships are provided to needy students	•	0	0	0	0
Campus is safe and secure	0	•	0	0	0
A sense of social service is inculcated in my ward.	0	•	0	0	0
There is an upward education mobility for my ward in the institute.	0	•	0	0	0
I am aware that the institute's passed out students are placed well in job market.	0	•	0	0	0

Any Suggestions *	
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No suggestions.

ALUMNI FEEDBACK (2023-2024)

Make a tick (√) mark in the appropriate cell

* Indicates required question
Name of Alumni * Stella John Rangare
E-mail ID * stellarangare28@gmail.com
Contact Number * 07350480911
Passed out from MKSSS BTINE as * ANM GNM BSc. (N) PBBSc. (N) MSc (N) PhD (N)

Current Working Organization *

Government Medical college and Hospital Aurangabad Maharashtra

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Please rate us *

	Agree	Sometimes	Disagree
Getting admission in the institute was a matter of pride for me	•	0	0
I have great respect to the institute as it is member institute of the trust founded by Maharshi Karve	•	0	0
The admission process in the institute was smooth & transparent	•	0	0
I have improved my knowledge, attitude & skills on nursing tremendously	•	0	0
The curriculum was very well planned and implemented appropriately.	•	0	0
The faculty are experienced and approachable.	•	0	0
All the teaching and learning activities were clear and student friendly.	•	0	0
The institute's transport to clinical areas was good and timely.	•	0	0
Good, safe and adequate hostel and mess facilities were made available	•	0	0

The institute's website is very informative and regularly updated.	0	
Your contribution to the mother institute through * Books		
 Donation Workshop/Seminar/conference Adopting individual student for education Any other 		
Most memorable moment in the Institute * Teacher support each candidate individually		
Would you like to learn/enroll for further courses with MK MSC nursing	SSS,BTINE ? If yes,	please mention *
Additional comments Best ever institute of Nursing i had found it has changed mine li great knowledge and got a Government job.	fe and because of goo	od facility and faculty i got

Employer/ Stakeholder Feedback (2023-2024)

Instruction: Our MKSSS BTINE Alumni are holding the post of Head Nurse/ Staff Nurse/ Teaching Faculty/ Any other specify in your organization. We shall appreciate and will be grateful to you if you can spare some valuable time to fill out this feedback form. Kindly evaluate them in the format attached. Kindly evaluate them in the below format and send your feedback to us at the earliest as it will help us to make necessary changes in the training of knowledge, attitude and practice of students at our institute. In the following table tick (\checkmark) the appropriate choice for each point.

Excellent - 5, Very Good -4, Good- 3, Average - 2, Below Average - 1.

Excellent - 0, very 0000 -4, 0000- 5, Average - 2, Below Average - 1.
* Indicates required question
Name of the Employer/ Authority: * Mayuri Shripad Ramdasi
Name of the Hospital/ Institute with address * Deenanath mangeshka hospital
Position (Authority person) * Head nurse
Contact Number * 9834149034
Name of the Candidate/ Employee * Ashwini Suvarna

Qualification of Employee/ candidate Gnm								
Position of the Candidate/ Employee * Shift incharge								
Work experience of	employee in yo	ur institute. *						
O-2 year	O-2 year							
3- 5 years								
5-10 years								
More than 10 years								
Please rate the employee. *								
	Excellent	Very Good	Good	Average	Below Average			
Ability to contribute to the organization goal.	•	0	0	0	0			
The ability to meet the objectives of organization.	•	0	0	0	0			

Creative in response to

workplace challenges •

Initiative to participate in workshop, group discussion, CNE and conference:	•	0	0	0	0
Focus on learning in the field:	•	0	0	0	0
Knowledge:	•	0	0	0	0
Competency to provide comprehensive care:	•	0	0	0	0
Efficiency:	•	0	0	0	0
Planning and organizational skills:	•	0	0	0	0
Communication skills:	•	0	0	0	0
Professional relations with health team:	•	0	0	0	0
Ability to give teaching :	•	0	0	0	0
Ability with using latest technology and workplace equipment:	•	0	0	0	0
Computer skills:	•	0	0	0	0
Leadership qualities:	•	0	0	0	0

Keenness to work in the hospital/Institute	•	0	0	0	0	
Respect for human being without caste, creed & gender bias:	•	0	0	0	0	
Using technology and workplace equipment	•	0	0	0	0	
Innovativeness and creativity	•	\circ	0	\circ	\circ	
Ability to take up responsibility:	•	\circ	\circ	\circ	\circ	
Obligation to work beyond schedule if required	•	0	0	0	0	
Additional comments. * Now studying pbbsc						
Remark * Excellent						
Name & Sign of Authority * Mayuri Shripad Ramdasi						

TEACHER'S EVALUATION FORM (2023-2024)

Make a tick (\checkmark) mark in the appropriate cell

* Indicates required question
Name of the Teacher * Mrs.Nupoor Bhambid
Name of student * Vaishali Patil
Contact Number * 08830142218
Course *
○ ANM○ GNM○ BSc. (N)
▶ PBBSc. (N)♠ MSc (N)▶ PhD (N)

Year of program *					
O 1st					
2nd					
○ 3rd					
O 4th					
if applicable, menti	on semester				
0 1					
○ II					
O III					
○ IV					
Please rate us *					
	Strongly agree	Agree	Sometimes	Disagree	Strongly Disagree
Teacher is prepared for	•	0	0	0	0
lectures					
Teacher knows the subject matter	•	\circ	0	0	0

Teacher is organized	•	0	0	0	0
Teacher makes students to think critically and solve problems creatively	•	0	0	0	0
Teacher is flexible in accommodating individual students need	•	0	0	0	0
Teacher is clear in giving directions and explanations in content, assignments & evaluations	•	0	0	0	0
Teacher allows active interactions during theory & clinical lectures	•	0	0	0	0
Teacher manages time well	•	\circ	0	0	0
Teacher returns assignments on time	•	0	0	0	0
Teacher is proficient with skills sets for demonstration	•	0	0	0	0

Teacher is present in the clinical area for guidance	•	0	0	0	0
Teacher uses adequate A.V. aids to make concept clear to students	•	0	0	0	0
Teacher's communication & pronunciation is clear and audible	•	0	0	0	0
Teacher guides & corrects positively in the clinical area	•	0	0	0	0
Teacher makes clinical learning very interesting	•	0	0	0	0
Teacher handholds/guides with difficult clinical situations	•	0	0	0	0
Uses appropriate discipline when necessary	•	\circ	\circ	0	0
Teacher is consistent & positive	•	0	0	0	0

Additional comments *

Madam has good management skills and madam is very kind