

PIDC - Program Monitoring Form

Professional Year End Evaluation (Year)

PIDC-QMS-TL-06-QAP-01-PYE-FRM-01

Congratulations on completing the professional year end exam.
Please fill in this feedback form for quality improvement program.

* Required

1. Email *

2. Name of the student and batch *

3. The design and delivery of the courses were in line with the program learning outcome. *

Mark only one oval.

1 2 3 4 5

Strongly disagree Strongly agree

4. The teaching-learning sessions and assessments conducted were in line with the outcomes of the topic and course. *

Mark only one oval.

1 2 3 4 5

Strongly disagree Strongly agree

5. The clinical sessions helped you develop soft skills such as communication, critical thinking and problem solving, team work, lifelong learning and information management, professional ethics and moral, leadership skills. *

Mark only one oval.

	1	2	3	4	5	
Strongly disagree	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Strongly agree

6. Adequate feedback was provided during the clinical sessions. *

Mark only one oval.

	1	2	3	4	5	
Strongly disagree	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Strongly agree

7. You are competent in clinical skills acquired during the professional year training. *

Mark only one oval.

	1	2	3	4	5	
Strongly disagree	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Strongly agree

8. The resources provided to you were adequate for student learning. *

Mark only one oval.

	1	2	3	4	5	
Strongly disagree	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Strongly agree

9. Student support services (Mentor mentee program, Student affairs, SCOP) helped you cope with the program and provided professional and personal guidance. *

Mark only one oval.

	1	2	3	4	5	
Strongly disagree	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Strongly agree

10. The knowledge skills and attitudes acquired during the professional year were helpful in achieving the BDS Program Learning Outcomes. *

Mark only one oval.

	1	2	3	4	5	
Strongly disagree	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Strongly agree

11. Over all exposure received gives you further opportunity to train for future dental practice. *

Mark only one oval.

	1	2	3	4	5	
Strongly disagree	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Strongly agree

12. Suggestions for future improvement *

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