SAMANTA CHANDRASEKHAR INSTITUTE OF TECHNOLOGY & MANAGEMENT, SEMILIGUDA

Name of the Faculty: Irendha modali Subject:	TE-II
Regd. No. Branch of Engineering: McChanical Semester: Phaktanam Rengo Fall 20004009 Herbanical Semester:	
Are you satisfied with the teachings of your Faculty? If Yes: Tick	mark one of the options .
Very Good: Good: Above average: Average: If No: Write the Reasons to analyze and take corrective measure	
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SAMANTA CHANDRASEKHAR INSTITUTE OF TECHNOLOGY	& MANAGEMENT, SEMILIGUDA
Name of the Faculty: Trendra Mudali Subjects	TE-II
Name of the student: Tripa + i Manda i Regd. No. F21030004066 Branch of Engineering: Mechanical Engg Semester: 4th	_
Are you satisfied with the teachings of your Faculty? If Yes: Tick	mark one of the options .
Very Good: Above average: Average: If No: Write the Reasons to analyze and take corrective measu	res.
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SAMANTA CHANDRASEKHAR INSTITUTE OF TECHNOLOGY & STUDENTS FEEDBACK FORMAT Name of the Faculty: Jahendra Musel' Subject: Name of the student: Tankadhar Institute Regd. No. F21020004065	Signature of the student. MANAGEMENT, SEMILIGUDA
SAMANTA CHANDRASEKHAR INSTITUTE OF TECHNOLOGY & STUDENTS FEEDBACK FORMAT Name of the Faculty: Jahendra Mugali Subject: Name of the student: Tankadhar Institute	Signature of the student. MANAGEMENT, SEMILIGUDA
SAMANTA CHANDRASEKHAR INSTITUTE OF TECHNOLOGY & STUDENTS FEEDBACK FORMAT Name of the Faculty: Tanka dhar Institute Regd. No. E21020004065 Branch of Engineering: Machanical Enga	Signature of the student. MANAGEMENT, SEMILIGUDA TE-II
SAMANTA CHANDRASEKHAR INSTITUTE OF TECHNOLOGY & STUDENTS FEEDBACK FORMAT Name of the Faculty: Ditendre Muduli Subject: Name of the student: Tankadhar Institute Regd. No. Branch of Engineering: Mochanical Engage Semester:	Signature of the student. MANAGEMENT, SEMILIGUDA TE-II

SAMANTA CHANDRASEKHAR INSTITUTE OF TECHNOLOGY & MANAGEMENT, SEMILIGUDA

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Name of the student: Regd. No.		KLEUD 62103000 400	06		
Branch of Engineering	: Mec	honical,			
Semester:		<u>Uth</u>	· · ·		
Are you satisfied with			If Yes : Tick mark	one of the option	ons.
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SAMANTA CHA	NDRASEKHAR II	NSTITUTE OF TECHNO	DLOGY & MANAGEN	MENT, SEMILIGUD	4
Name of the Faculty:	Jitende	TUDENTS FEEDBACK	FORMAT ubject:	TI	
Name of the student:	Nanest	non day le			
Regd. No.	$-\mathcal{F}$	21030004041			
Branch of Engineering Semester:	: YU Meci	hanical ym			
Are you satisfied with	the teachings o	f your Faculty ? If Yes	: Tick mark one of	the options .	
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