



GOVT. OF ASSAM
OFFICE OF THE PRINCIPAL::ASSAM ENGINEERING INSTITUTE
CHANDMARI, GUWAHATI: ASSAM: PIN-781003
EMAIL-principal.aei@gmail.com

No. AEI/PURCHASE/2022/

Date:

TENDER NOTICE

Sealed quotations affixing non-refundable court fee stamp of Rs 8.25 only are invited by the undersigned for printing & supply of feed-back forms & booklets at Assam Engineering Institute, Guwahati. The interested parties may collect tender papers from the office of the undersigned w.e.f. 01/01/2023. The last date of submission of quotation is fixed on 19/01/2023 up to 2 PM and will be opened at 3 P.M. on the same day in the office Chamber of the undersigned in presence of the Tenderers or their authorized representatives, if any. The Paper used should be minimum 75 GSM and non blotting so that people can write on it using ink pen.

List of Feed back Format:

Sl. No.	Specification	Size	Page per Set	Qty. reqd.
1.	FEEDBACK FORM FOR TEACHER EVALUATION BY STUDENTS	FS	1	5000
2.	PARENTS' FEEDBACK	A4	1	500
3.	ALUMNIFEED BACK	A4	1	500
4.	EMPLOYERS FEEDBACK	A4	1	500
5.	অভিভাবকৰ দ্বাৰা বিভাগৰ মূল্যায়ন প্ৰ-পত্ৰ	A4	1	500
6.	MENTORING RECORDS OF STUDENT	A4	10	500

The terms & conditions of this notice are as follows.

TERMS & CONDITIONS

1. For quoting the items one must have an established firm. The undersigned may verify the establishment before placing the order.
2. The materials covered under this invitation are to be delivered at consignee's address within 7 days from the date of placing the order.
3. Tenderers submitting tenders shall quote their lowest possible prices (including delivery & installation at site). Taxes if any are to be shown separately in the quotation.
4. All the Tenders shall be either type written or written neatly in indelible ink. Detail specification for each item quoted must be furnished.
5. All prices and other information like discount etc. bearing on the price shall be written both in figures and words, without any overwriting.
6. Payment will be made on presentation of bill in triplicate after full delivery with full satisfaction. No advance payment shall be made.
7. The undersigned however reserves the right to accept or reject any or all tenders without assigning any reason thereof.
8. The items and the number of items mentioned in the list of items are tentative. Depending upon the fund. The purchaser may or may not purchase an item and vary the quantity.

Sd/-

Principal

Assam Engineering Institute
Guwahati-3

Date: 28-12-22

Memo No. AEI/ PURCHASE/2022/ 5067

Copy to:

1. Notice Board / Website
2. Office Copy.

Principal

Assam Engineering Institute
Guwahati-3



**ASSAM ENGINEERING INSTITUTE
CHANDMARI, GUWAHATI-03**

Department:

PARENTS' FEEDBACK

Details of Ward	Details of Father / Mother / Guardian
Name:	Name:
Year of Admission:	Profession / Qualification:
Contact No.:	Residential Address:
Email:	Contact No.:
	Email:

Please tick (✓) the appropriate response in the five point scale from:

Sl. No.	Subject/Point	Excellent (5)	Very Good(4)	Good (3)	Fair (2)	Poor (1)
1	How do you rate the overall personality development of your child during the course?					
2	How to rate the infrastructure of the department like library, Laboratory and lab equipment?					
3	How do you rate the curricular services provided by the department during yourchild's studies?					
4	How do you rate the quality of the academic resources namely course material,teachers etc?					
5	How do you rate the relevance of the field/study visits, training programmes, Guest lectures etc?					
6	Have your ward been motivated to become and entrepreneur?					
7	Is the development able to achieve the mission and vision targeted?					

Date:

Signature of Parent



**ASSAM ENGINEERING INSTITUTE
CHANDMARI, GUWAHATI-03**



FEEDBACK FORM FOR TEACHER EVALUATION BY STUDENTS

1. Name of Teacher:

2. Semester:

3. Subject code and name:

4. Branch:

5. Academic Year:

Instructions: (a) Avoid writing your name anywhere so that your identity is not revealed.
(b) In the following table tick (✓) the appropriate choice for each point.

Subject / Point		Excellent (5)	Very Good(4)	Good (3)	Fair (2)	Poor (1)
1	In introductory classes, the teacher could draw the curiosity to learn the subject	<input type="checkbox"/>				
2	Punctuality in the class and Regularity in taking classes	<input type="checkbox"/>				
3	Focus on syllabi, self-confidence, communication skill	<input type="checkbox"/>				
4	Clarity and understandability of Teacher's explanations	<input type="checkbox"/>				
5	Knowledge of the teacher on the subject	<input type="checkbox"/>				
6	Fluency in Presentation	<input type="checkbox"/>				
7	Conduct/behaviour of the teacher	<input type="checkbox"/>				
8	Skill of creating interest in the subject	<input type="checkbox"/>				
9	Abilities to refer to latest developments in the field	<input type="checkbox"/>				
10	Uses of teaching aids (OHP/Blackboard /PPT's) in terms of legibility, visibility and structure	<input type="checkbox"/>				
11	Interactive skill of the teacher	<input type="checkbox"/>				
12	Shares the answers of class tests or sessional test questions after the conduct of the class	<input type="checkbox"/>				
13	Shows the evaluated answer books of class tests to the students	<input type="checkbox"/>				
14	Helping approach towards varied academic interests of students	<input type="checkbox"/>				
15	Helps students irrespective of gender	<input type="checkbox"/>				
16	Helps students facing physical, emotional and learning challenges	<input type="checkbox"/>				
17	Approach towards developing professional skills among students	<input type="checkbox"/>				
18	Helps students in realizing career goals	<input type="checkbox"/>				
19	Availability of teacher in the laboratory for whole duration of laboratory hours	<input type="checkbox"/>				
20	Helping the students in conducting experiments through set of instructions or demonstrations	<input type="checkbox"/>				
21	Overall rating of the teacher	<input type="checkbox"/>				

Any comments/suggestions to improve teaching-learning process (in brief)



**ASSAM ENGINEERING INSTITUTE
CHANDMARI, GUWAHATI-03**

ALUMNI FEEDBACK

Personal Details	Employment Details
Name:	Employer:
Address:	Designation:
Phone:	Total Experience:
Email:	Working Domain:
Year of Completion:	Job Profile:
Department:	

Higher Education Details if Applicable:

Programme	Specialization	University / Institute	Year of Completion
B.E / B. Tech / BCA / B. Sc			
M.E / M. Tech / MCA / M. Sc			
Professional Course			
Any other			

Please tick (✓) the appropriate response in the five point scale from:

Sl. NO.	Questions	Response				
		Excellent (5)	Very Good (4)	Good (3)	Fair (2)	Poor (1)
1	How do you rate the courses that you have learned in the department in relation to your current status?					
2	How do you rate the infrastructure and lab facilities of the department?					
3	How do you rate the contribution of the faculty members in relation to your current status?					
4	How do you rate the academic initiatives taken by the department to bridge the gap between industry and academia?					
5	How do you rate the extra / co-curricular activities or programs you have participated as a student helpful in your career and overall development?					
6	How do you rate the courses you have learned that helped to analyze, design and solve real-time engineering problems?					
7	How do you rate the course you have learned in the department helped in your professional behavior, teamwork and life-long learning?					

Please feel free to add your additional comments / suggestions where you and the Department can work together for betterment of future students and improvement of the Department.

- I.
- II.
- III.
- IV.

Name of the Alumni:

Signature:



**ASSAM ENGINEERING INSTITUTE
CHANDMARI, GUWAHATI-03**



EMPLOYERS FEEDBACK

- Name of the Employee (Alumni):
- Degree and Year of Passing:
- Designation since joining: (i)..... (ii)..... (iii)
- Department:
- Date of joining:

A. Please tick (✓) the appropriate response in the five point scale from:

Sl. NO.	Questions	Response				
		Excellent (5)	Very Good(4)	Good (3)	Fair (2)	Poor (1)
1	How do you rate the overall personality development of your employee?					
2	How do you rate the problem analysis and solving ability of your employee?					
3	How do you rate the employee's ability to design and develop solutions?					
4	How do you rate your employee's technical knowledge and skill?					
5	How do you rate your employee's participation in social activities?					
6	How do you rate your employee's innovativeness and creativity?					
7	How to rate your employee's ability to contribute to the goal of the organization?					

B. Please provide following information

1. Strength of the Programme
2. Opportunities for improvement with reference to part A.....

Name of the Employer:

Name of the Organization:

Designation and Department:

Phone / Email:

Address:

Signature:Date:



অসম অভিযান্ত্ৰিক প্ৰতিষ্ঠান
চান্দমাৰী, গুৱাহাটী- 03

বিভাগ:

অভিভাৱকৰ দ্বাৰা বিভাগৰ মূল্যায়ন প্ৰ-পত্ৰ

সন্তানৰ বৃত্তান্ত	অভিভাৱকৰ বৃত্তান্ত
নাম:	নাম:
নামভৰ্তিৰ চন:	বৃত্তি:
ফোন নম্বৰ	ঠিকনা:
ইমহেল:	ফোন নম্বৰ:
	ইমহেল

➤ তলত দিয়া তালিকাখনৰ প্ৰতিটো পইন্টৰ বিপৰীতে শুদ্ধ (✓) চিন দিব

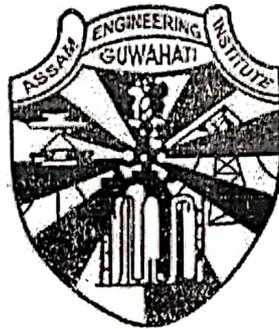
ক্র: নং	বিষয়/ পইন্ট	উত্তম (5)	বৰ ভাল (4)	ভাল (3)	মধ্যম (2)	নিকট (1)
1	আপোনাৰ সন্তানৰ ব্যক্তিস্ব বিকাশত এই পাঠ্যক্ৰমৰ প্ৰভাৱ কেনেধৰণৰ ?					
2	বিভাগটোৰ গ্ৰন্থাগাৰ, বিজ্ঞানাগাৰ আদি আপোনাৰ মতে পৰ্যাপ্ত হয় নে ?					
3	আপোনাৰ সন্তানটিয়ে পঢ়া বিভাগৰ পাঠ্যক্ৰমত আপুনি কিমান সক্ষম ?					
4	অধ্যয়নৰত বিভাগৰ শৈক্ষিক সমল আৰু শিক্ষকৰ মানদণ্ড আপোনাৰ মতে কোন স্থৰ ?					
5	বিভাগৰ দ্বাৰা পৰিচালিত ক্ষেত্ৰ অধ্যয়ন, শিক্ষামূলক ভ্ৰমণ, প্ৰশিক্ষণ ইত্যাদিবোৰৰ মূল্যায়ন আপুনি কি দৰে কৰিব					
6	আপোনাৰ সন্তান স্বাবলম্বী হোৱাৰ বাবে কিমান অনুপ্ৰাণিত হৈছে বুলি ভাবে					
7	কাৰিকৰী শিক্ষাৰ লক্ষ্য আৰু উদ্দেশ্য সাধনত বিভাগৰ সুবিধাবোৰ পৰ্যাপ্ত হয়নে					

তাৰিখ.....

অভিভাৱকৰ চহী.....



MENTORING RECORDS OF STUDENT



ASSAM ENGINEERING INSTITUTE

CHANDMARI, GUWAHATI-03, ASSAM

Name of the Student:

Roll No.:

Name & Designation of the Mentor:



MENTORING RECORDS

Personal Details

Name of the Student:

Roll No. :

Contact Number:

Email:

Father's Name:

Home Address:



PHOTO

Contact Number:

Mother's Name:

Contact Number:

Residing at Hostel/PG/Rented/Own House:

Local Guardian's Name & Address:

Name of Mentor Teacher:

Department:

Designation:

ATTENDANCE RECORDS

1st Year Odd Semester

Subjects	No. of classes held & Percentage of Classes								Corrective Measures for low percentage
	Aug'		Sept'		Oct'		Nov'		
	N	%	N	%	N	%	N	%	

Signature of Mentor

Signature of HOD

Signature of Principal



1st Year Even Semester

Subjects	No. of classes held & Percentage of Classes								Corrective Measures for low percentage
	Feb'		March'		April'		May'		
	N	%	N	%	N	%	N	%	

2nd Year Odd Semester

Subjects	No. of classes held & Percentage of Classes								Corrective Measures for low percentage
	Aug'		Sept'		Oct'		Nov'		
	N	%	N	%	N	%	N	%	

Signature of Mentor

Signature of HOD

Signature of Principal

**ASSAM ENGINEERING INSTITUTE
GUWAHATI-03**



Year Even Semester

Subjects	No. of classes held & Percentage of Classes								Corrective Measures for low percentage
	Feb'		March'		April'		May'		
	N	%	N	%	N	%	N	%	

3rd Year Odd Semester

Subjects	No. of classes held & Percentage of Classes								Corrective Measures for low percentage
	Aug'		Sept'		Oct'		Nov'		
	N	%	N	%	N	%	N	%	

Signature of Mentor

Signature of HOD

Signature of Principal



3rdYear Even Semester

Subjects	No. of classes held & Percentage of Classes								Corrective Measures for low percentage
	Feb'		March'		April'		May'		
	N	%	N	%	N	%	N	%	

INTERNAL ASSESSMENT RECORDS

1st Year Odd Semester

Subjects	Class Tests				HA				Quiz CO covered	Poster CO covered	Group Discussion CO covered
	CT Marks		CO covered		HA Marks		CO covered				
	1	2	CT 1	CT 2	1	2	HA 1	HA 2			

Signature of Mentor

Signature of HOD

Signature of Principal



2nd Year Even Semester

Subjects	Class Tests				HA				Quiz	Poster	Group Discussion
	CT Marks		CO covered		HA Marks		CO covered		CO covered	CO covered	CO covered
	1	2	CT 1	CT2	1	2	HA 1	HA 2			

3rd Year Odd Semester

Subjects	Class Tests				HA				Quiz	Poster	Group Discussion
	CT Marks		CO covered		HA Marks		CO covered		CO covered	CO covered	CO covered
	1	2	CT 1	CT2	1	2	HA 1	HA 2			

Signature of Mentor

Signature of HOD

Signature of Principal



REPORT ON PARENT-TEACHER'S MEETING

Semester	Name of Guardian	Observations/Suggestions	Signature & Date
1 st			
2 nd			
3 rd			
4 th			
5 th			
6 th			

Signature of Mentor

Signature of HOD

Signature of Principal