***Form S6******Course Evaluation shall be conducted by the Head of the Department***

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| **Course Evaluation Form: Undergraduate Degree Programmes**  **Faculty of Management**  **University of Peradeniya** | | | | |
| 1. **Department** | |  | | |
| 1. **Degree Programme** | |  | | |
| 1. **Course Code** | |  | | |
| 1. **Course Title** | |  | | |
| 1. **Date** | |  | | |
| ***Please tick one of the appropriate responses with respect to each statement given below :*** | | | | |
| 1. | Syllabus was given at the beginning. | | Yes | No |
| 2. | Topics in the syllabus were covered. | | Yes | No |
| 3. | Classes were held according to the time table. | | Yes | No |
| 4. | Lectures were clear and organized. | | Yes | No |
| 5. | Recommended readings were available. | | Yes | No |
| 6. | Recommended readings were relevant. | | Yes | No |
| 7. | Evaluations were fair and transparent. | | Yes | No |
| 8. | Discussion classes were held regularly. | | Yes | No |
| 9. | I deepened my interest in the subject. | | Yes | No |
| 10. | ***Any other comments*** | |  |  |
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