

Quality Enhancement Cell (NUML / HEC) Islamabad

| Proforma 2 | : |
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Faculty Course Review Report

(To be filled by each teacher at the time of Course Completion)

For completion by the course instructor and transmission to Head of Department or his/her nominee (Dept. Quality Officer) together with copies of the Course Syllabus outline

| Department: | | | Faculty: | | |
|--------------------------------------|--------------------|-------------------|----------|----------------------|----------|
| Course Code: | | Title: | | | |
| Session: | | Semester: | Autumn 🗔 | Spring | Summer 🗌 |
| Credit Value: | | Level: | | Prerequisites: | |
| Name of Course | | No of Students | Lectures | Other (Please State) | |
| Instructor: | | Contact Hours | Seminars | | |
| Assessment Methods: | | | | | |
| give precise details (no & length of | | | | | |
| assignments, exam | s, weightings etc) | | | | |

Distribution of Grades/Marks and other Outcomes: (adopt the grading system as required)

| Undergraduate | Originally | A1 | A2 | A3 | B1 | B2 | B3 | C1 | C2 | D | F | Withdrawal | Total |
|-------------------|--------------------------|----|----|----|----|----|----|----|----|---|-----|------------|-------|
| | Registered | | | | | | | | | | | | |
| No of Students | | | | | | | | | | | | | |
| Post-Graduate | Originally Registered | A1 | A2 | A3 | B1 | B2 | B3 | C1 | C2 | I | IT. | Withdrawal | Total |
| | | | | | | | | | | | | | |

Overview/Evaluation (Course Co-coordinator's Comments)

Feedback: first summarize, then comment on feedback received from:

1) Student (Course Evaluation) Questionnaires

2) External Examiners or Moderators (if any)

3) Student / Staff Consultative Committee (SSCC) or equivalent, (if any)

4) Curriculum: comment on the continuing appropriateness of the Course curriculum in relation to the intended learning outcomes (course objectives) and its compliance with the HEC Approved / Revised National Curriculum Guidelines.

5) Assessment: comment on the continuing effectiveness of method(s) of assessment in relation to the intended learning outcomes (Course objectives)

| 6) | Enhancement : | comment of | n the impleme | ntation of c | hanges propo | sed in earli | er Faculty | Course l | Review |
|----|---------------|------------|---------------|--------------|--------------|--------------|------------|----------|--------|
| Re | eports | | | | | | | | |

7) Outline any changes in the future delivery or structure of the Course that this semester/term's experience may prompt

| Name: | (Course Instructor) | (Signature) | Date: |
|-------|----------------------|-------------|-------|
| Name: | (Head of Department) | (Signature) | Date: |

