

IBA ELP Mid Review Status Form - 2022

Client Feedback Form

Project Name/Title

Company's/Client's Name

Client's Supervisor Name

Designation

Faculty Advisor Name

Class #

Day/Date of review

Venue

Are you satisfied with performance of the project associates/students so far?

- Yes
 Somehow
 No

Specify the reason: _____

What percentage of project deliverables are achieved so far?

- Less than 20%
 20%-40%
 40%-60%
 60%-80%

Grade the student on the scale of 1 to 5 where 1 being the lowest and 5 being the highest

Evaluation Parameters	Student Name & ERP				
	Student 1 Name ERP #	Student 2 Name ERP #	Student 3 Name ERP #	Student 4 Name ERP #	Student 5 Name ERP #
Responsibility & committment [attendance in meetings / Time and Effort exerted on the project / Contributions made so far]	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5
Coordination & Communication [performance in a team setting / as a team member]	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5
Comments on Individual Student's performance					
Interim Score (out of 100%)					

Client Signature