

IBA ELP Mid Review Status Form - 2025

Faculty Feedback Form

Project Name/Title

Company's/Client's Name

Client's Supervisor Name

Designation

Faculty Advisor Name

Class #

Day/Date of review

Venue

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 #
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
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
Comments on Individual Student's performance				
Interim Score (out of 100%)				

Faculty Signature