**Department of ………………….**

**Faculty of Medicine, University of Ruhuna**

**Pre and Para Clinical Departments**

**EXTERNAL EXAMINERS – FEEDBACK FORM**

Dear Colleague,

Your contribution as an examiner on the above examination is highly appreciated. Please be kind enough to fill this feedback form which will help us to improve the standard of the examination in future.

Thank you.

Head/Department of …………………………

|  |  |
| --- | --- |
| 2ndMBBS |  |
| 3rd MBBS PART I |  |
| 3rd MBBS PART II |  |

 Examination (Please tick the relevant cage)

Date:

Batch:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Item | Need to improve | Average | Good | Excellent |
| Learning outcomes, teaching learning strategies and assessments are closely aligned (constructive alignment) |  |  |  |  |
| The examination was commenced on time |  |  |  |  |
| Adequate Instructions were given to the examiners  |  |  |  |  |
| Overall quality of the examination was good |  |  |  |  |
| Overall performance of the students  |  |  |  |  |
| Strengths of the students |
| Weaknesses of the students |
| Additional observations and comments |

Name of the examiner:

Signature:

Date:

External Examiners’ feedback form for Pre and Para clinical departments was recommended by the IQAC on 26th May 2022 and approved at the 394th Faculty Board held on 15th June 2022.