



**LIBRARY & INFORMATION CELL**

Date: \_\_\_\_\_

**Feedback Form**

To improve library services and the level of user satisfaction, your feedback is extremely important to us. Please fill this form and hand it over to the library staff.

**Name of the User (Optional):** \_\_\_\_\_

**User Category:** Student [  ] Teaching Staff [  ] Non-Teaching Staff [  ] Others [  ]

**If Student:**

**Program:** \_\_\_\_\_ **Year:** I / II / III **Semester:** I / II / III / IV / V / VI

**If Teaching/Non-Teaching Staff:**

**Department:** \_\_\_\_\_ **Designation:** \_\_\_\_\_

**1. How Frequently do you visit the library?**

a. Daily [  ] b. Weekly [  ] c. Monthly [  ] d. Never [  ]

**2. Satisfaction Levels of Library Users:**

**Please give your satisfaction levels based on the below metrics:**

**I – Highly Satisfied, II-Satisfied, III-Neutral, IV-Dissatisfied**

Sr. No.	Statement	I	II	III	IV
1	Existing library rules & regulations				
2	Availability of Books, Journals, Magazines and Newspapers				
3	Quality & Quantity of books and journals available				
4	Time Taken in transaction of the reading material				
5	Library Staff Support & Cooperation				
6	Availability of Reprographic (Photocopy) facility				
7	Environment in the library				
8	Access to Digital Library Services and E-Resource/E-Databases				
9	Way of approach and behaviour of library staff				

**Suggestions for improvement:**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_