

Student Feedback form

Feedback >

feedback form

Name *

First Name

Last Name

Email

Register number.

#####

Phone *

 +91

81234 56789

Course *

-Select-

Course FeedbackRating

#####

Submit



Student Feedback form

All Feedback



Feedback

feedback form

All Feedback

<input type="checkbox"/> Name ▾	Phone ▾	Course ▾	Course FeedbackRating ▾	Email ▾	Register number. ▾
<input type="checkbox"/> Pruthevi S	+917200402867	Cloud computing	10	pruthevis9d@gmail.com	192424070

Student Feedback form

Feedback
feedback form

All Feedback

All Feedback

Name	Phone	Course
Pruthevi S	+917200402867	Cloud computing

Name	Pruthevi S
Phone	+917200402867
Course	Cloud computing
Course FeedbackRating	10
Email	pruthevis9d@gmail.com
Register number.	192424070

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