

Student Feedback Questionnaire on School Registration Process

Instructions: Thank you for taking the time to complete this questionnaire. Your feedback will help us improve the school registration process.

1. General Information (optional)

- Academic Standing (Freshman, Sophomore, Junior, Senior): _____
- Major/Program: _____

2. Rate your overall experience with the school's registration system.

- ☐ Very Satisfied
☐ Satisfied
☐ Neutral
☐ Dissatisfied
☐ Very Dissatisfied

3. Did the registration system load quickly and without delays/errors?

- ☐ Yes ☐ No

4. Were you able to find and register for your desired courses without any problems?

- ☐ Yes, with no issues.
☐ Yes, but with minor issues.
☐ No, I had major issues.

5. If you faced issues, please describe them.

6. Did you encounter any technical errors while using the system?

- ☐ Yes ☐ No

7. If yes, please explain:

8. Were the instructions provided on the registration system easy to understand?

- ☐ Very Easy
☐ Easy
☐ Neutral
☐ Difficult
☐ Very Difficult

9. How could the interface of the registration system be improved?

10. What features would you like to see added to the registration system?

11. Any additional comments or suggestions?

Thank you! Your responses will help guide improvements made to the registration system.