

FACULTY SURVEY

Purpose: To assess faculty's satisfaction level & effectiveness of the program.
The information provided will be kept in confidence.

Name (Optional): _____ **Designation:** _____

Department/ Faculty: _____ **Service Duration:** _____

Date of Survey: _____

Encircle your satisfaction level

Sr. No.	Statements	Poor	Fair	Good	Very Good	Excellent
1	Your involvement in teaching and research	1	2	3	4	5
2	The intellectual stimulation of your work	1	2	3	4	5
3	Your involvement in admin duties	1	2	3	4	5
4	Your interaction with the students	1	2	3	4	5
5	Cooperation from your colleagues	1	2	3	4	5
6	The mentoring available to you	1	2	3	4	5
7	Administrative support from the Department/ Faculty/ Institute	1	2	3	4	5
8	Your prospects for future progress as faculty member	1	2	3	4	5
9	Salary and compensation package	1	2	3	4	5
10	Job security and stability at the Department	1	2	3	4	5
11	Time you have for your family and yourself	1	2	3	4	5
12	Overall working environment in your Department/Institute	1	2	3	4	5
13	Experience and knowledge utilization by the Department	1	2	3	4	5
14	Respect/behavior towards juniors faculty and staff	1	2	3	4	5
15	Involvement in non-instructional and community services	1	2	3	4	5
16	Grooming of juniors for future leadership	1	2	3	4	5
17	Your contribution in the Department/Institute uplift	1	2	3	4	5
18	Prefer institutional/national interests over personal benefits	1	2	3	4	5
19	Your satisfaction with the policies of this university	1	2	3	4	5
20	Your satisfaction with senior administration of the Institute	1	2	3	4	5
21	Your satisfaction with the Institute as a place to work	1	2	3	4	5
22	Availability of teaching resources at Institute	1	2	3	4	5
23	Your satisfaction with leadership of the Department/ Institute	1	2	3	4	5
24	Opportunities for professional development at Institute	1	2	3	4	5
25	Recognition/appreciation of good teaching	1	2	3	4	5
26	Fee remission for your children (If any)	1	2	3	4	5
27	Health facilities provided by NEI	1	2	3	4	5



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Suggestion(s) to Enhance Satisfaction Level