



Tehran University of Medical Sciences  
TUMS

School of Nursing and Midwifery

Date

Reference Number

Attached File

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## Feedback Form

Student level & Major:

BSc  in .....

MSc  in .....

PhD  in .....

Semester:

Your country:

Are you satisfied with the program? Yes  No

If no why?

Please write down at least 3 straight and weakness.

Are you satisfied with the services you receive? Yes  No

If no why?

Please write down at least 3 straight and weakness.

Are you satisfied with English language skill of the teachers? Yes  No



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Please write down if you have any suggestion.