

**RAMANUJAN COMPUTING CENTRE
ANNAUNIVERSITY, CHENNAI – 600 025**

27.09.2019

To
All the Heads of Departments/Divisions
Main Campus (CEG/ACT/SAP)
Anna University, Chennai – 600 025.

Sir/Madam,

All the Heads of the departments are requested to send their **UG/PG** Students to the Ramanujan Computing Centre to exercise their feedback by online at the corresponding date and time mentioned below:

Sl.No	Date	Time	Programme
1.	03.10.2019	Full Day	B.E Computer Science & Engineering / All M.E Programmes
2	04.10.2019	Full Day	B.Tech Information Technology / All MCA & M.Tech Programmes
3.	09.10.2019	Full Day	B.E Electronics & Communication Engineering / All M.E Programmes
4.	10.10.2019	Full Day	B.E Electrical & Electronics Engineering / All M.E Programmes
5.	11.10.2019	F.N	B.E Civil Engineering / All M.E Programmes
6.	14.10.2019	A.N	B.E Geo Informatics & B.E Agri / All M.E Programmes
7.	15.10.2019	F.N	B.E Industrial, Mining & Printing Technology / All M.E Programmes
8.	16.10.2019	A.N	B.E Manufacturing Engineering / All M.E Programmes, M.Sc.(Comp.Sci., Maths & IT)
9.	17.10.2019	F.N	M.B.A, Media Science, Physics, Chemistry, Geology,
10	18.10.2019	A.N.	B.E Mechanical Engineering / All M.E. A.C.Tech.
11.	21.10.2019	Full day	B.Tech Chemical Tech./ M.Tech Chemical Tech B.Tech – Leather & PRPC Tech / M.Tech PRPC & Foot wear Tech
12.	21.10.2019	Full day	B.Tech Ceramic , Textile & Apparel / M.Tech – Ceramic, Textile & Nano Tech.
13.	22.10.2019	Full day	B.Tech – IBT, Food & Pharmaceutical Tech / all M.Tech Programmes
14.	22.10.2019	Full day	SAP – B.Arch – Architecture / all M.Arch & M.Plan All other departments & absentees in A.C.Tech & SAP Campus

All the class advisors are requested to take copy of the enclosed form (also available at www.annauniv.edu/rcc/fbform2019.pdf), fill the particulars and submit to RCC with **nominal roll**, before the schedule.

Encl: Subject handling particulars form


DIRECTOR

Copy to: PS to VC, PA to Registrar, Deans, CEG, ACT & SAP

Anna University, Chennai – 600 025
Online Students Feedback System

(July – December 2019)

Department:
Course:
Semester:
Batch:
No. of Students:

S.No	Sub. Code	Subject Name	Staff Id	Course Instructor	Designation	Department*
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

* write the department of the Course Instructor

Name of the class advisor :
Contact No :

Signature of Class Advisor