

PAHALWAN GURUDEEN PRASIKSHAN MAHAVIDLAYA

PANARI, LALITPUR (UP) 284403

ALUMNI FEEDBACK FORM

Name.....Father Name.....

Mother Name.....Pass Out Class.....Year.....

Enrollment Number.....Mobile No.....Whatapp No.....

Name of the Company/Firm/Industry you are currently working in.....

.....

Total Experience (if any).....E-Mail.....

Very Poor Below Average Average Above Average Excellent

1. Teacher learner relationship

2. Academic environment

3. Faculty

4. E-Resources

5. Laboratory and equipment setup

6. Training and placement

7. Library and its facility

8. Involvement of alumni

9. College administratin

10. Sports Facility

11.Course Employability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12.Course Structure	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13.Examination Pattern	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.Overall rating of the College	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please State Yes or No

	Yes	No
1.Would you like to keep yourself in touch with your department?	<input type="radio"/>	<input type="radio"/>
2.Have you participated in any Alumni meet?	<input type="radio"/>	<input type="radio"/>
3.Is there a need to improve teaching learning?	<input type="radio"/>	<input type="radio"/>
4.Are you are you willing to contribute to development of department/College?	<input type="radio"/>	<input type="radio"/>
5.Do you feel proud to be Alumnus of PGPM?	<input type="radio"/>	<input type="radio"/>

Suggestions/Scope for future improvement, if any.....

Date.....

Sig.of.Alumini.....

