



THE ICFAI UNIVERSITY, DEHRADUN

ALUMNI FEEDBACK



Name of the Alumni: _____

Name of the Degree: _____

Year of Passing _____

Current Employment: _____

Designation and Address of Company/Institution: _____

For each item please indicate your level of satisfaction with the following statement by choosing (✓) a score between 1 and 5

[1- Poor; 2- Average; 3- Good; 4- Very Good; 5- Excellent]

Are you satisfied with:-	1	2	3	4	5
1. Teaching Standard.					
2. The education imparted at IUD is useful and relevant in your present Job.					
3. Curriculum /syllabus is up to the standard of the institution.					
4. The curriculum content experiential learning through student seminar, group discussion, project and field visit.					
5. Curriculum equipped me with necessary technical skills to face the industry.					
6. Sports Facilities of IUD.					
7. Availability of Library facilities of IUD.					
8. The Training and Placement Cell has provided ample On/Off-campus placement opportunities.					
9. Your perception about the teachers					
10. Your contribution to the development of the Department/institution					

Any specific Suggestion for improvement