



ALUMNI FEEDBACK FORM

ESSENTIAL DETAILS

Alumni Name			
Father's Name			
Date of Birth (DD/MM/YY)			
Year of Passing out		Branch	
Permanent Address			
Contact No.		Mobile No.	
E-Mail ID			
Present Organization			
Designation		Present Location	

Kindly select the appropriate option as per the following criteria.

A - Highly Efficient B - Efficient C - Satisfactory D - Below Satisfaction

I. FEEDBACK ABOUT COLLEGE (Point No. 1 to 5)

1.	Do you feel proud to be associated with Arya as an Alumni?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>				
2.	How do you rate development activities organized by the College for your overall development?	A	<input type="checkbox"/>	B	<input type="checkbox"/>	C	<input type="checkbox"/>	D	<input type="checkbox"/>
3.	Are you willing to contribute to the development of the college?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>				
4.	Were /Are your grievances properly handled at the college?								
4.	(a) As a student	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>				
4.	(b) As an alumni	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>				
5.	Rate the adequacy of following as they were During your tenure as a student at Arya: -								
	• Laboratories & Equipments	A	<input type="checkbox"/>	B	<input type="checkbox"/>	C	<input type="checkbox"/>	D	<input type="checkbox"/>
	• Library	A	<input type="checkbox"/>	B	<input type="checkbox"/>	C	<input type="checkbox"/>	D	<input type="checkbox"/>
	• Computer Facilities	A	<input type="checkbox"/>	B	<input type="checkbox"/>	C	<input type="checkbox"/>	D	<input type="checkbox"/>
	• Internet & Wi-Fi	A	<input type="checkbox"/>	B	<input type="checkbox"/>	C	<input type="checkbox"/>	D	<input type="checkbox"/>
	• R&D Projects	A	<input type="checkbox"/>	B	<input type="checkbox"/>	C	<input type="checkbox"/>	D	<input type="checkbox"/>

II. FEEDBACK ABOUT DEPARTMENT & FACULTY (Point No. 6 to 9)

6.	Have you obtained sufficient technical know-how (both in theory and practice) at ARYA?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
7.	Is the education imparted at ARYA useful and relevant in your present job?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
8.	Were the HOD's & Faculties cooperative?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

9. **Rate the following academic initiatives taken by the college to improve technical know-how of the students.**
- Industry Oriented Projects A B C D
 - Seminars & Workshop A B C D
 - Online Examinations A B C D
 - Special Training Classes for bridging Industry Academic gap A B C D

III. FEEDBACK ABOUT TRAINING & PLACEMENT CELL (Point No. 10 to 16)

10. Has the T&P Cell provided ample **On campus** placement opportunities? Yes No
11. Has the T&P Cell provided sufficient **Off campus** placement opportunities? Yes No
12. Have you availed Career counseling and guidance for higher studies from T&P Cell? Yes No
13. If you are invited to deliver A Guest Lecture/ A Special Talk / A Motivational Session for your juniors, will you be interested? Yes No
14. Do you like to join the college Alumni Association? Yes No
15. Have you participated in any Alumni meet as of now? Yes No
16. Do you receive regular updates from the college through Mails/ Calls/ SMS etc? Yes No

IV. GENERALIZED EXPERIENCE SHARING (Point No. 17 to 20)

17. **Have you ever been appreciated by your**
- **Company.** If yes, please share details _____

 - **Faculty.** If yes, please share details _____

 - **Peers.** If yes, please share details _____

18. **Have you made any significant achievement as:**
- A student of ARYA. If yes, please share details _____

 - An Employee of your organization. If yes, please share details _____

19. **Most Memorable Moment in the college.**

20. **Suggestion for improvements**
- Department _____

 - College _____

SIGNATURE

DATE