



# Shri Guru Ram Rai University

(Estd. by Govt. of Uttarakhand vide Shri Guru Ram Rai University Act. No. 03 of 2017 & Recognized by UGC u/s 2(f) of UGC Act 1956)  
Campus: Patel Nagar & Pathri Bagh, Dehradun-248001, Uttarakhand

## Alumni feedback form (2019-2020)

|                                       |                    |
|---------------------------------------|--------------------|
| Name                                  |                    |
| Specialization and year of Graduation |                    |
| Address for communication             |                    |
|                                       | City state         |
| PIN Code                              | Employment details |
|                                       |                    |
| Email                                 |                    |
| Company                               |                    |
|                                       |                    |

Kindly rate the following criteria on the scale of 1-5. Your genuine response will be helpful for the continuous quality improvement of our UG /PG Programme

1. Excellent      2. Very Good      3. Good      4. Average      5. Poor

| S.No | Criteria  | Rating |
|------|---|--------|
| 1.   | How do you rate the courses that you have learnt in the college in relation to your current job / occupation.   |        |
| 2.   | Extent of Curriculum meeting industry needs   |        |
| 3.   | Educational Resources of Your University.   |        |
| 4.   | Benefit from communication skills ,presentation skills and leadership qualities gained from co- curricular and extra curricular activities in your career /Higher education |        |
| 5.   | Your ability to engage in to resolve contemporary issues and acquire lifelong learning  |        |
| 6.   | Competence to function on multidisciplinary team in your job  |        |
| 7.   | Extent of ethical, social cultural and environmental values inculcated ,helping you to relate issues with societal needs.   |        |

### Suggestions for improvement

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Student Name

Student Signature

Date

