ALUMNI FEEDBACK FORM

* Required

1. Name of the Alumnus *

2. Address of the Alumnus *

3. Contact Number *

4. Email ID *

5. Name of the course completed *

6. Year of completion of course *

7. Present Occupation/ Designation *

8. How do you rate the courses that you have learnt in the college in relation to your current job / occupation? *

Mark only one oval.

- ◯ Excellent
- ◯ Very Good
- ◯ Good
- ◯ Average
- ◯ Poor

9. Faculty of SCLC *

Mark only one oval.

- ◯ Excellent
- ◯ Very Good
- ◯ Good
- ◯ Average
- ◯ Poor

10. Teaching Learning Environment *

Mark only one oval.

- ◯ Excellent
- ◯ Very Good
- ◯ Good
- ◯ Average
- ◯ Poor

11. Exposure to Curricular Activities *

Mark only one oval.

- ◯ Excellent
- ◯ Very Good
- ◯ Good
- ◯ Average
- ◯ Poor
- ◯ Option 6

12. Discipline in Campus *

Mark only one oval.

- ◯ Excellent
- ◯ Very Good
- ◯ Good
- ◯ Average
- ◯ Poor

13. Library *

Mark only one oval.

- ◯ Excellent
- ◯ Very Good
- ◯ Good
- ◯ Average
- ◯ Poor
- ◯ Option 6

14. Office Staff *

Mark only one oval.

- Excellent
- Very Good
- Good
- Average
- Poor

15. Hostel Facilities *

Mark only one oval.

- Excellent
- Very Good
- Good
- Average
- Poor

16. Canteen Facilities *

Mark only one oval.

- Excellent
- Very good
- Good
- Fair
- Poor

17. Educational Resource *

Mark only one oval.

- ◯ Excellent
- ◯ Very Good
- ◯ Good
- ◯ Average
- ◯ Poor

18. Admission Procedure *

Mark only one oval.

- ◯ Excellent
- ◯ Very good
- ◯ Good
- ◯ Fair
- ◯ Poor

19. Mention at least one point which make you feel proud to be associated with SCLC as Alumni *

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20. In what way have the development activities organized by the College contributed to your overall development? *

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21. How would you like to contribute towards developmnet of SCLC *

Mark only one oval.

- Academic Activity such as Guest Lecture
- Provideing internship-Placement to SCLC Students
- Financial support
- Any other

22. Any other suggestions / comment

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