

Career Point University
Hamirpur
IQAC
Feedback Form – Alumni
 (Session:)

Name of Student (Alumni): **Father Name:**

Enrollment No.: **Contact No:**

Gender (M/F): **Email:**

Department: **Program of Study:**

Batch: **Company Name:**

Designation:

A) Please give your valuable feedback to improve the quality education by making “✓” in the box of corresponding column according to the scale given: 5 – Excellent, 4 – Good, 3 – Fair, 2 – Poor, 1 - Very Poor.

S. N.	Statement	5	4	3	2	1
1.	Relevance of the courses that you have learnt in the CPUH in relation to your present work.					
2.	Satisfaction with the infrastructure and lab facilities.					
3.	Assistance and support provided to you by university staff.					
4.	Sport facilities provided by the university.					
5.	Canteen facilities provided by the university.					
6.	Educational resources provided by the university.					
7.	Campus placement opportunities provided by the University.					
8.	Evaluate the overall academic experience you have with your teachers in your university program.					
9.	Your recommendations for your friends and relatives to join CPUH.					
10.	Knowledge and skill gained by you at the University are adequate to meet your present assignments.					
11.	Alumni meeting organized on regular interval by the University.					
12.	Annual Fest, events and co-curricular activities organized by the University enhance skill of students.					

B) Suggestions for improvement:

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Name

Signature of the Alumni