INTERNAL QUALITY ASSURANCE CELL

Academic rear.
Academic Year:

Name:	Degree:				
Branch:	Year of Completion:				
E-mail:	Mobile:				
Current Organization:					
lease give your valuable feedback on design and revience or each of the following parameters.	w of sylla	bus. Sele	ct your ran	king on the s	scale of 1
(1-Strongly disagree, 2-Disagree,	3-Neutral	, 4-Agree	, 5-Strongly	y agree)	
SI. Rating \square	5	4	3	2	1
Subject					
 The Courses offered in the program are well designed and promotes learning experience of the Students. 					
The interdisciplinary courses and CBCS Courses are available within the program.					
3. The Courses are relevant to societal needs and employment potential.					
4. The defined Program Educational Objectives (PEOs) is well established.					
5. The Institute encourages Alumni to contribute towards Curriculum Development.					
Comments/Suggestion (if any):					

Signature:

For Office Use

Date:

(Internal Quality Assurance Cell)