BHARATHIYAR ARTS AND SCIENCE COLLEGE FOR WOMEN,

DEVIYAKURICHI

ALUMINI FEEDBACK FORM

1.Name of the Alumni:

2.Occupation:

3.Address & Mobile number:

4.Acdemic Year:

5.Course:

Please tick the following rating scale:

1.Do you feel the facilities in the college are adequate? ☐ Yes ☐ No

2.Do you feel that you had physically secured in the campus? ☐ Yes ☐ No

3.Are you satisfied about hostel facilities? ☐ Yes ☐ No

4.Are you satisfied for the cooperation from the faculties? ☐ Yes ☐ No

5.Can you make direct communication with the teaching staff? ☐ Yes ☐ No

6.Will you recommend students for our college? ☐ Yes ☐ No

Date:

Place: **Signature of the Alumini**