



SCIENT INSTITUTE OF TECHNOLOGY

Ibrahimpatnam, Ranga Reddy (District) -501506

EMPLOYER'S FEEDBACK ON CURRICULUM

Dear Employer,

Your support and feedback will help us to maintain the required standards of education

Name Of The Employee (Alumni):

Degree & Year of passing:

Department:

Designations(Since joining): (i)

(ii)

(iii)

Date Of Joining:

Part-A Please indicate(tick) your level of satisfaction:

Substantial(High):3

Moderate(Medium):2

Slight (Low):1

Particulars	Indicators		
	Substantial	Moderate	Slight
1.Technical Competency			
2.Leadership and professional ethics			
3.Self Motivation			
4.Proficiency in soft skills			
5.Innovative ideas generation			

Part-B Please provide the following information

Strength Of The Programme	Opportunities for improvement with reference to Part-A
Name Of The Authority:	
Designation & Department:	
Email:	Contact No:
Address:	

Date:

Name Of the Employer:

Signature of the employer: