



NECN/ /7.2.3/ FT 05

### FEEDBACK FROM ALUMNI

Program.....Name: .....Age /Yrs: .....

Dept : .....Year of study: .....Occupation:.....

Make tick mark in the appropriate cell:

SI	Particulars	Strongly agree	Agree	Neutral	Disagree	Strongly disagree
1	Feel proud to be student of NECN					
2	The learning I had in this NECN is useful in my career					
3	The developments in this NECN in recent years are appreciative					
4	The Alumni have a role to play in academically strengthening the NECN further					
5	Formulation of department wise Alumni associations a step in the right direction					
6	The department administration should take initiative to efficiently enroll and strengthen the alumni-association					

Suggestions for the improvement:

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Proposed date for next ALUMNI .....

Date:

Signature of Alumni