



### Alumni feedback form on Ambience

<b>Name of the Alumni</b>	
<b>USN</b>	
<b>Year of Passing out</b>	
<b>Department</b>	

**Directions:** Please indicate your level of satisfaction with the following statement by marking (✓) between 1 and 5.

<b>Excellent (5)</b>	<b>Very Good (4)</b>	<b>Good (3)</b>	<b>Average (2)</b>	<b>Poor (1)</b>
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Sl.No	. Statements	Excellent	Very Good	Good	Average	Poor
<b>Institutional Facilities</b>						
1	Library Facilities					
2	Central Computing Center					
3	Training and Placement					
4	Sports and Games					
5	Literary Activities					
<b>Department Facilities</b>						
1	Laboratory Infrastructure					
2	Laboratory Equipment's					
3	Department Library					
4	Classrooms					
<b>General Amenities</b>						
1	Facilities for Physical fitness					
2	Medical / First Aid					
3	Safety Measures					
4	Wi-Fi Connectivity					
5	E-learning resources					

Any Suggestion .....

Signature