

**Employer Feedback Form**

**Dear Employer,**

Many graduates of our University are already working in your organization. We are thankful to you for providing them employment with your prestigious Company/Organization.

We shall very much appreciate and be grateful to you if you can spare some of your valuable time to fill up this feedback form. It will help us to improve the Institute further and give you better employees in future.

Tick  the number that best describes your level of satisfaction at each question: 1 - far from satisfied, 2 - not satisfied, 3 - satisfied, 4 - happy, 5 - very happy

<b>How satisfied are you with the student/s work performance in each of these areas:</b>	1	2	3	4	5
1. General communication skills					
2. Developing practical solutions to work place problems					
3. Working as part of a team					
4. Creative in response to workplace challenges					
5. Their planning and organization skills					
6. Self-motivated and taking on appropriate level of responsibility					
7. Open to new ideas and learning new techniques					
8. Using technology and workplace equipment					
9. Ability to contribute to the goal of the organization					
10. Technical knowledge/skill					
11. Ability to manage/leadership qualities					
12. Innovativeness, creativity					
13. Relationship with seniors/peers/subordinates					
14. Involvement in social activities					
15. Ability to take up extra responsibility					
16. Obligation to work beyond schedule if required					

**On a scale of 1 to 10 how do you rate your overall satisfaction with IGDTUW students and the curriculum?**

1	2	3	4	5	6	7	8	9	10

If you were dissatisfied with any aspect, please comment further:

↑

How could our programs be improved? What specific comments do you have regarding the curriculum?

Any other comment(s):

Would you like to recruit more IGDTUW students?

Yes

No

Would you refer us to other organization(s)?

Yes

No

Please feel free to speak in confidence with our TPO/ HoD about any aspects of the program or students performance.

Name: \_\_\_\_\_ Position: \_\_\_\_\_

Company/organization: \_\_\_\_\_

Phone: \_\_\_\_\_

Date: \_\_\_\_\_