**NCRD’s Sterling Institute of Management Studies, Nerul**

ALUMNI FEEDBACK FORM

|  |  |
| --- | --- |
| Alumni Full Name |  |
| Date of Birth (DD/MM/YY) |   |
| Year of Passing out |  | Department |  MMS / MCA |
| Permanent Address |  |
| Contact No. |   | Mobile No. |  |
| E-mail ID |  |
| Present Organization |  |
| Designation |  | Present Location |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **No** | **Statement** | **Agree** | **Sometimes** | **Disagree** |
| 1 | Do you feel proud to be associated with NCRD SIMS as Alumni? |  |  |  |
| 2 | Institute organizes various kind of activities for overall development of students. |  |  |  |
| 3 | Would you like to contribute in the development of the Institute? |  |  |  |
| 4 | Institute handles student’s grievance properly. |  |  |  |
| 5. | Institute is having adequate Infrastructure and equipment for practical experiences. |  |  |  |
| 6. | Is education imparted useful and relevant in your present job? |  |  |  |
| 7. | Have you obtained sufficient technical knowledge (both in theory and practical) at NCRD SIMS? |  |  |  |
| 8. | Has the T & P Cell provided ample On Campus and Off Campus placement opportunities? |  |  |  |
| 9. | Is Institute providing good hospitality as Alumni after passing out? |  |  |  |
| 10. | Do you receive regular updates from the Institute? |  |  |  |

**Most Memorable moment in the Institute:**

**Suggestions for Improvement:**

**DATE: SIGNATURE**