

INDIAN INSTITUTE OF MANAGEMENT AND COMMERCE

ALUMNI FEEDBACK FORM

Alumni Name : _____

Father's Name : _____

Date of Birth (DD/MM/YY) : _____

Year of Passing UG/PG : _____

Educational Qualifications : _____

Joined Alumni Association in the Year : _____

Designation in Alumni Association : _____ Member / Office Bearer_____

Permanent Address : _____

Present Address : _____

Phone No. : _____

Mobile No. : _____

E-mail ID : _____

Present Organization : _____

Designation : _____

1. Are you a member of IIMC Alumni?

- a) Yes b) No

If No, Would you like to become a member of IIMC Alumni?

- a) Yes b) No

2. How do you feel as a member of IIMC Alumni?

- a) Satisfied b) Not satisfied c) Not sure

3. Are you associated with the activities of IIMC?

- a) Always b) Sometimes c) Never

4. In what way you contribute to the development of the college?

- a) Monetary b) Non - Monetary c) Both

5. How do you provide the financial support?

- a) Scholarships b) Infrastructural Development c) Other facilities

6. What are the practical experiences that you provide for the development of the students?

- a) Competitions b) Guest Lectures & Workshops c) Internships

7. What is your role in collaborating college and society?

- a) Awareness Programs b) Placement support c) Donations from others

8. Is education imparted at IIMC useful and relevant in your present job?

- a) Agree b) Disagree c) Neutral

9. Do you play any role in the campus placements?

- a) Yes b) No

10. What is your response in encouraging entrepreneurship in IIMC?

- a) Required b) Not Required c) Depends on Students
apptitude

11. What is your primary means of communication with IIMC?

- a) Web site/e-mail b) Alumni association c) Personal Contacts

Suggestion for improvements: _____

Date :

Signature