

SHILLONG COLLEGE

Boyce Road, Laitumkhrah, Shillong -793003

ALUMNI FEEDBACK FORM

Dear Alumni,

improvement (s).

We shall very much appreciate if y give us your valuable views and inputs for fur	-	•		l up this feedbac	ck form and
1. Your Name:					
2. E-mail address:					
3. Course:					
4. Year of completion:					
5. Mobile Number:					
6. Are you a member of the Shillong Colle	ge Alumni Asso	ociation?	Yes	□ No	
7. Kindly tick and indicate on the below pa			f this exercise).	
Parameters	Excellent	Very Good	Good	Average	Poor
Relevance of the Course Curriculum in				U	
your career plans.					
Student-Faculty relationship					
Student-office Staff relationship					
Placement Facility					
Library Facilities					
Quality of support reading					
materials/resources					
Infrastructure facility					
Overall college environment					
Sports and other development programs					
Overall experience in college					
 8. Are you pursuing higher studies? If yes, 9. Name of the institute/university pursuing 10. Are you working?	g higher educati	ion:		me	
13. In the future, if we invite you to particip	ate in any of ou	r programs will y	ou be willing	to come?	es □No

14. We will also highly appreciate it if you can comment or give suggestions on where can the college make