



Feedback Form

Date

Name:

Enrollment no:

Email:

What did you like very much?

☐

Environment

☐

Administration

☐

Attitude of employees

☐

Infrastructure

☐

Talent and Innovation

Rate supportiveness of employees.

1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐

Rate the impact of projects company is doing.

1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐

Rate the overall experience of the visit.

1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐

Rate quality of provided resources.

1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐

How much likely do you recommend the company for their services?

1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐

Any constructive suggestions

Sign Here