



LOYOLA-ICAM
College of Engineering and Technology (LICET)
Loyola Campus, Chennai - 600 034.
Employer Feedback Form

Dear Employer,

Many graduates of our Department/College/Institute/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 University 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

How satisfied are you with the student/s work performance

in each of these areas:

	1	2	3	4	5
1. General communication skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Developing practical solutions to work place problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Working as part of a team	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Creative in response to workplace challenges	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Their planning and organization skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Self-motivated and taking on appropriate level of responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Open to new ideas and learning new techniques	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Using technology and workplace equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Ability to contribute to the goal of the organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Technical knowledge/skill	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Ability to manage/leadership qualities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Innovativeness, creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

		1	2	3	4	5
13.	Relationship with seniors/peers/subordinates	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14.	Involvement in social activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15.	Ability to take up extra responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16.	Obligation to work beyond schedule if required	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Any other comment(s):

Please feel free to speak in confidence with our staff about any aspects of the program or students' performance.

Phone:

Name: _____ Position/Designation:-

Company/organization: _____