

ALAGAPPA UNIVERSITY, KARAIKUDI
 (Accredited with 'A+' grade by NAAC)
INSTITUTIONAL AUDIT
FEEDBACK FROM PARENTS/GUARDIANS

S.No	Details		
1	Parent	Name	
		Employment	
		Position	
		Address	
		Pin	
Phone:	LL		
	Mobile		
2	Your Son/ Daughter/ Ward	Name	
		Program/Course	
		Year of Study	

3	Are you an Alumnus of the University (Please Tick)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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4. Your Satisfaction regarding	Very High	High	Low	Very Low
Admission Process				
Improvement in Knowledge of your son/ daughter/ ward				
Improvement in Skill of your son/ daughter/ ward				
Improvement in Attitude of your son/ daughter/ ward				
Improvement in Self-confidence level of your son/ daughter/ ward				
Increase in the Job Opportunity of your son/ daughter/ ward				
Grades obtained by your son/ daughter/ ward				
Quick declaration of examination results of your son/ daughter/ ward by the University				
Interaction/Communication with the University				

5. Overall satisfaction of your Association with the University				
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Signature: