

Feedback from Employer on Curriculum and Students 2022-2023

A. Type of setting/Organization

- a. Government
- b. Semi-Government
- c. Private

B. Name:

Prof. Devareddy. B

C. Designation:

Administrator TSS Raichur

D. Contact Number

9742478977

E. Is our alumni are working in your organization

- a. Yes
- b. No

1. How do you rate the relevance of the Programme in relation to the industry?

- 5 Very Good
- 4 Good
- 3 Average
- 2 Acceptable
- 1 Poor

2. How do you rate the competencies/outcomes in relation to the course content?

- 5 Very Good
- 4 Good
- 3 Average
- 2 Acceptable
- 1 Poor

3. Capability to contribute to the achievement of the organization's goals and objectives

- 5 Very Good
- 4 Good
- 3 Average
- 2 Acceptable
- 1 Poor

4. ICT and Soft skills of the employees

- 5 Very Good
- 4 Good
- 3 Average
- 2 Acceptable
- 1 Poor

5. Ability to manage relationship (seniors, subordinates and juniors)

- 5 Very Good
- 4 Good
- 3 Average
- 2 Acceptable
- 1 Poor

6. Rate the Communication skills of the employee

- 5 Very Good
- 4 Good
- 3 Average
- 2 Acceptable 1 Poor
- 1 Poor

7. Ability to work in a group/Team

- 5 Very Good
- 4 Good
- 3 Average
- 2 Acceptable
- 1 Poor

8. Overall performance of our alumni (your employee)

- 5 Very Good
- 4 Good
- 3 Average
- 2 Acceptable
- 1 Poor

9. The present curriculum is as per the needs of the industry

- 5 Very Good
- 4 Good
- 3 Average
- 2 Acceptable
- 1 Poor

10. The syllabus has good balance between theory and application

- 5 Very Good
- 4 Good
- 3 Average
- 2 Acceptable
- 1 Poor

11. Your suggestion about the college/academics.

- 5 Very Good
- 4 Good
- 3 Average
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A. Type of setting/Organization

- a. Government
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B. Name:

Ratilal

C. Designation:

Managing Director

D. Contact Number

9449874236

E. Is our alumni are working in your organization

- a. Yes
- b. No

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A. Type of setting/Organization

- a. Government
- b. Semi-Government
- c. Private

B. Name:

Amaregouda S

C. Designation:

Principal

D. Contact Number

9448177924

E. Is our alumni are working in your organization

- a. Yes
- b. No

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- c. Private

B. Name:

Dr.Sheelakumari Das

C. Designation:

Principal

D. Contact Number

9448973670

E. Is our alumni are working in your organization

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- b. No

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