



GLOBAL RESEARCH INSTITUTE OF PHARMACY, YAMUNA NAGAR

STUDENT FEEDBACK FORM: TRAINING/PLACEMENT INITIATIVES

NAME: _____ FATHER NAME: _____

BATCH: _____ PHONE NO. _____

E-MAIL: _____

Dear Student,

Your feedback ensures that we are meeting your Training/Placement needs. We would appreciate it if you could take a few minutes to share your views with us so we can plan it better in the next session.

Sr. No.	Statement	Please Tick	
		Yes	No
1	Have you attended any training sessions (Soft skills/Technical) organized by the Training & Placement Cell?		
2	Are you satisfied with the quality and relevance of the training sessions (Soft skills/Technical) related to your career goals?		
3	Did the training sessions/workshops improve your technical or soft skills?		
4	Were you timely informed about the training and placement activities (mock/GD) organized by the institute?		
5	Have you participated in any mock interview activities for placement?		
6	Whether the institute organizes In-campus and Off-campus placement drives?		
7	Are you satisfied with the assistance provided by the institute for In-campus and Off-campus placement drives?		
8	Do these activities help you in: <ul style="list-style-type: none">• Acquiring professional ethics• Developing planning abilities• Gaining confidence and advanced knowledge• Improving your communication skills• Inculcating the habit of lifelong learning		

Any Suggestion:

Date:

Signature

