Proforma-8

Employer Survey(To be filled in by HoD/Sectional Head – after the completion of each academic year)

The purpose of this survey is to obtain HoD/Sectional Head input on the quality of education. QEC require assessing the quality of the academic program. The survey is with regard to University graduates employed at your section. We seek your help in completing this survey

Name of Employee:				_ Designation				
	A: Excellent	B: Very good	C: Good		D: Fair		E: Poor	•
I.	Knowledge:							
1.								
	discipline,(if applicable)			(A)	(B)	(C)	(D)	(E)
2.	Problem formulation and solving skills			(A)	(B)	(C)	(D)	(E)
3.	Collecting and analyzing appropriate data Ability to link theory to Practice Ability to design a system component or process			(A) (A)	(B) (B)	(C) (C)	(D)	(E) (E)
4.							(D)	
5.				(A)	(B)	(C)	(D)	(E)
6			-	(A)	(B)	(C)	(D)	(E)
II.	Communication Skills:							
1.	. Oral communic	cation		(A)	(B)	(C)	(D)	(E)
2.	. Report writing			(A)	(B)	(C)	(D)	(E)
3.	. Presentation sk	ills		(A)	(B)	(C)	(D)	(E)
III.	Interpersonal	Skills:						
1.	. Ability to work	in teams		(A)	(B)	(C)	(D)	(E)
2.	. Leadership			(A)	(B)	(C)	(D)	(E)
3.	. Independent th	inking		(A)	(B)	(C)	(D)	(E)
4.	. Motivation			(A)	(B)	(C)	(D)	(E)
5.	. Reliability			(A)	(B)	(C)	(D)	(E)
6	. Appreciation o	f ethical values		(A)	(B)	(C)	(D)	(E)
IV.	Work skills:							
1.				(A)	(B)	(C)	(D)	(E)
2.				(A)	(B)	(C)	(D)	(E)
3.	. discipline			(A)	(B)	(C)	(D)	(E)
V.	General Comments:							
	Please make any additional comments or suggestions, which you think would help							
	_	programs for the prepar	_		who will	enter	your fiel	d.
	Did you know	as to what to expect fro	m graduates?					
VI.	Information about Organization:							
	1. Departr	ment/Section Name						
	2. Type of job							
	3. Number of Graduates (specify the program) in your department/Section:							
HoD/Chairman Signature			Stamp					