

(This format is to be used to have Feedback from intern for assessment of Industrial training)



RNGPIT, Bardoli

Feedback form for assessment of the Industrial Training

Program: B.E. ,Electrical Engineering

Date:

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Name of Student :

Class :

Name of Industry:

PEN :

Evaluation Scale: 1- Excellent; 2 – Very Good; 3 – Good; 4 – Average; 5 – Poor

Sr. No.	Survey Questionnaires	1	2	3	4	5	Comments
1.	How would you rate the seriousness regarding industrial training?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2.	Did the faculty help you in choosing the proper industry?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.	How would you rate the practical working environment in industry?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4.	Did you become aware about the practical aspects in industry?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5.	Did you notice some interesting facts and new technologies adopted in the industry?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6.	Would you suggest your juniors to undergo training there?	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO		
7.	Do you want to join this industry as employee?	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO		
Industry Address:		Industry contact person Name :					
		Contact No.:					