



QUESTIONS

RESPONSES 1

1 response



SUMMARY	INDIVIDUAL
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Accepting responses

lidsrajahundry@gmail.com ▼



1 of 1



Responses cannot be edited

Employer Feedback Form

For NAAC IQAC

* Required

Email address *

lidsrajahundry@gmail.com

1. General communication skills *

1

2

3

4

5

Not very

Very much

2. Developing practical solutions to work place problems *

	1	2	3	4	5	
Not very	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	Very much

3. Working as part of a team *

	1	2	3	4	5
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>

4. Creative in response to workplace challenges *

1 = Very dissatisfied 5 = Very satisfied

	1	2	3	4	5
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>

5. Their planning and organization skills *

	1	2	3	4	5
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>

6. Self-motivated and taking on appropriate level of responsibility *

	1	2	3	4	5
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>

7. Open to new ideas and learning new techniques *

1	2	3	4	5
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>

8. Using technology and workplace equipment *

1	2	3	4	5
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>

9. Ability to contribute to the goal of the organization *

1	2	3	4	5
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>

10. Technical knowledge/skill *

1	2	3	4	5
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>

11. Ability to manage/leadership qualities *

1	2	3	4	5
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>

12. Innovativeness, creativity *

1	2	3	4	5
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>

13. Relationship with seniors/peers/subordinates *

1	2	3	4	5
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>

14. Involvement in social activities *

1	2	3	4	5
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>

15. Ability to take up extra responsibility *

1	2	3	4	5
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>

16. Obligation to work beyond schedule if required *

1	2	3	4	5
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>

On a scale of 1 to 10 how do you rate your overall satisfaction with AMU students and the curriculum? *

1 2 3 4 5 6 7 8 9 10

How could our programs be improved? What specific comments do you have regarding the curriculum? *

The Curriculum Development in the institution is bound by the regulations of the Dr.NTRUHS and DCI. The institutional boards of studies (IBS) aligns with norms of DCI and Dr.NTRUHS for the curriculum and works in line with the institutional objectives and govern the academic cell in planning the academic calendar and schedule to achieve competency in academics and research.

Any other comment(s): *

Faculty members are also encouraged to participate in workshops organized to discuss the framing of the syllabus of dental courses. We arrange guest lectures of eminent personalities from industry to address the faculty members about upcoming research projects and areas of thrust.

Would you refer us to other organization(s)? *

Yes

No

Please feel free to speak in confidence with our TPO/ staff about any aspects of the program or students performance. If you would like staff to contact you to discuss any issues, please provide your contact number. *

9676964664

Name *

G. Nagarjuna Reddy

Position *

Director

Organization *

Lenora Institute of Dental Sciences

Date *

MM DD YYYY

12 / 29 / 2018

Submitted 12/29/18, 5:16 PM

