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Gokaraju Rangaraju Institute of Engineering and Technology

(Autonomous)

Nizampet, Bachupally Road, Bachupally, Kukatpally, Hyderabad, Telangana- 500090

Department of Civil Engineering

Head of the Department

M.Tech (Structural Engineering) Alumni survey

Greetings!!

To the students who graduated from the Gokaraju Rangaraju Institute of Engineering and Technology (GRIET), Department of Civil Engineering:

We would appreciate your help in assessing your help in assessing how well the department of Civil engineering prepare students to meet its program Educational Objectives (PEO's) and Program Outcomes (POs). By answering the following survey questions, you will provide us valuable feedback that is needed for program improvement.

Thank you in advance for your participation. We look forward to hearing from you.

Roll No:	Year of Graduati	Year of Graduation:	
Name of the Alumnus: In your candi		l opinion, you are able to	
S.No.	Alumni Survey	Rate from 1-5 (5 being the high) and (1 being the low)	
1	Apply knowledge of the technical areas relevant to your organisation		
2	Technical preparedness for the responsibilities assigned to you		
3	Ability to work with in realistic constraints		
4	Ability to bridge theory and Practice		
5	Usage of software/tools such as STADD,ETabs		
6	Understanding the impact of engineering solutions in societal contest		
7	Understanding of Environmental and sustainable technology		
8	Understanding of professional and Ethical responsibilities		
9	How do you rate working with multi-disciplinary teams		
10	Abiity to communicate		
Ι	List all the positions you have held with start and finish dates starting from the time of graduation		
II	List awards/ Higher degree/commendations /Promotions and salary, increments (In percentage) with dates you have received since joining your job		
III	List courses done with duration of the course in days or years as applicable		
IV	List any certifications (Skill development) carried out. (Like STADD, MS Project)		
V	List any CSR activity under taken like blood donation		

Any Other:

Date