

# Alumni Feedback

Dear Alumni,

We value your feedback to improve our institution's academic and administrative standards. Please take a few minutes to complete this form. Your responses will be kept confidential.

\* Indicates required question

1. Name: \*

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2. Batch & Year of Graduation: \*

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3. Course Completed: \*

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4. Email ID: \*

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5. Contact Number: \*

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6. Institution currently working: \*

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7. Designation: \*

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8. The teaching methods were effective in helping you understand medical concepts \*

*Mark only one oval.*

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree

9. The MBBS curriculum prepared you well for clinical practice or higher studies \*

*Mark only one oval.*

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree

10. The faculty members were competent, supportive, and approachable \*

*Mark only one oval.*

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree



11. Received timely academic support or mentoring when needed \*

Mark only one oval.

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree

12. You were encouraged to participate in academic, co-curricular, or extracurricular activities \*

Mark only one oval.

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree

13. The college infrastructure was (labs, library, classrooms, hospital facilities) adequate during your study period \*

Mark only one oval.

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree



14. You had access to digital/e-learning resources and the internet \*

*Mark only one oval.*

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree

15. The hostel, canteen, and other student facilities were satisfactory \*

*Mark only one oval.*

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree

16. You gained adequate clinical exposure and hands-on training during your course \*

*Mark only one oval.*

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree



17. The institution helped to develop your communication, leadership, and teamwork skills \*

*Mark only one oval.*

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree

18. You were adequately trained to handle ethical and professional issues in healthcare \*

*Mark only one oval.*

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree

19. Your training here helped you meet the expectations of your current job/workplace \*

*Mark only one oval.*

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree



## 20. Research opportunities and encouragement: \*

Mark only one oval.

- Very Poor
- Poor
- Average
- Good
- Excellent

## 21. Practical/clinical training sessions: \*

Mark only one oval.

- Excellent
- Good
- Average
- Poor

## 22. Do you feel recognized by the institution for your professional achievements? \*

Mark only one oval.

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree



23. Would you be interested in participating in alumni events and activities? \*

Mark only one oval.

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree

24. Are you proud to be an alumni of this medical college? \*

Mark only one oval.

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree

25. Are you willing to contribute in future (e.g., as a mentor, speaker, or resource person)? \*

Mark only one oval.

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree



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26. Would you recommend this institution to aspiring medical students? \*

Mark only one oval.

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree

27. How satisfied are you with your overall experience at the institution? \*

Mark only one oval.

- Very Satisfied
- Satisfied
- Neutral
- Dissatisfied
- Very Dissatisfied

28. Which areas of the curriculum need more emphasis or improvement? \*

29. What do you consider to be the key strengths of the medical training program at our college? \*

30. What suggestions would you like to offer to improve the program?



Betsy

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