



INSTITUTE OF AERONAUTICAL ENGINEERING

(Autonomous)

Dundigal, Hyderabad - 500 043, Telangana

STUDENT EXIT SURVEY

The information you provide on this questionnaire will be kept completely confidential

Name of the Student	
Roll Number	
Department	
Year of Graduation	
Permanent Address	
E-mail address	

Please take a few minutes to answer the following questions. Your answers to the questions and your feedback will assist the department to continue upgrading the program and to better serve its students and the community. Some of the questions need to be answered on a scale of 1 to 5.

(Please **circle** a number, 1 = Poor, 2 = Fair, 3 = Good, 4 = Very Good, 5 = Excellent).

PART I: GENERAL

1. What courses in your Program did you like the best? Explain.
2. What courses belonging to your branch did you like the best? Explain.
3. What courses in the Program, the training that you received is effective?
4. Are you considering post-graduate studies right after your graduation or in the future? If yes, would you consider IARE? Why?
5. Do you have a job offer? If yes, where, and what is your initial salary?

To what extent did each of the following contribute to: (Tick in the box)

S.No	Specification	Rubric strength				
		1	2	3	4	5
1	How do you rate the training that you received in the mathematics and physics courses?					
2	How do you rate the overall training that you received?					
3	How did the faculty respond to your technical needs inside and outside of classrooms?					
4	How helpfully did the lab technicians respond to your needs?					
5	How did the course scheduling meet your time constraints?					

6	How do you feel the program prepared you for the career in your branch of Engineering?					
7	How would you rate the student/faculty interaction in the program?					
8	How effective was the counseling from your faculty advisor? Explain:					
9	How effective was the counseling from career guidance advisor? Explain:					
10	How would you rate the laboratory facilities? Explain:					
11	How would you rate the classrooms and laboratory environment?					

PART II: OUTCOMES

At this time you should have attained the required professional, technical, and social experience in the program to practice the following twelve program outcomes. Please mark on a scale of 1 to 5.

(Please **circle** a number, 1 = Poor, 2 = Fair, 3 = Good, 4 = Very Good, 5 = Excellent) to indicate your knowledge with the ability to:

S.No	Specification	Rubric strength				
		1	2	3	4	5
1	I have gained an in-depth knowledge of mathematics, science and my branch of Engineering.					
2	I have an ability to identify, formulate and solve engineering problems.					
3	I am able to design digital and analog systems pertaining to electrical systems.					
4	I am able to design electrical and electronics circuits and conduct experiments with electrical engineering as well as to analyze and interpret data.					
5	I had the opportunity to acquire new knowledge to use modern engineering tools, software and equipment to analyze problems necessary for engineering practice.					
6	I have an ability to recognize the impact of engineering on society.					
7	I have an ability to recognize the impact of the professional engineering solutions in societal and environmental contexts, and demonstrate the knowledge of, and need for sustainable development.					
8	I had the opportunity to understand professional and ethical responsibility.					
9	I have an ability to function effectively as an individual, and as a member or leader in diverse teams, and in multidisciplinary settings.					
10	I am able to communicate effectively in both verbal and written form.					
11	I had Knowledge of contemporary issues to undertake innovative projects. I have the training necessary to visualize and work on multi- disciplinary tasks.					

12	I am able to develop confidence for self-education and to understand the value of life-long learning. I had the opportunity to use the techniques and skills to face and succeed in competitive examinations like GATE, GRE, TOEFL, GMAT etc.					
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PART III: COMMENTS

Make additional comments as you desire.

Thanks for your time!

Date

Signature of Student