



PANIPAT INSTITUTE OF ENGINEERING AND TECHNOLOGY

SAMALKHA, PANIPAT

_____ Department

PEO Evaluation Form

(For Alumni only)

Personal Details:

Name: _____ RollNo: _____

Father's Name: _____

Batch: _____ (e.g. 2010-2014)

Permanent Address: _____

Contact No: _____ email id: _____

Work Profile (Starting from current Organization):

Name of Institution/ Organization	Designation	From (dd/mm/yyyy)	To (dd/mm/yyyy)	Location	Package

Higher Studies:

Name of the Course Pursuing	University	Subject	Year of Enrolment	Year of Passing

Specify Exam Qualified (GATE/ CAT/ JRF/ NET Other): _____

UPSC Exam Qualified (if any) _____

State Exam Qualified (if any) _____

Enterprenership Details:

Enterpreneurship (if any) started in your field of study only: _____

In other field: _____ Location: _____

Level of achievement:

Input on Program/Courses:

- Was the course curriculam of your program during your studies with PIET useful? Did it provide you sufficient knowledge and expertise to further build on your career and professional advancement? Briefly explain

- Any suggestion for refinement of course curriculum and program Education Objectives. State briefly.

(Signature of alumni)

(Signature of Represntative)