



AJAY BINAY INSTITUTE OF TECHNOLOGY
Sector-1, CDA, Cuttack

STUDENT FEEDBACK ON ORIENTATION SESSION 2023-24

(INTERNAL QUALITY ASSURANCE CELL)

Name of the Department:		Semester:
Name of the Student:		Duration of the Orientation Session:
Sl.No.	<u>Parameters</u>	
1	During the orientation session, did you enjoy connecting other students and staff members of the department before class started?	
2	What orientation activity did you enjoy the most?	
3	Was there any information missing that would be helpful?	
4	Was it easy to find the information you needed?	
5	How did you become aware of the student orientation?	
Date:		Signature