ALUMNI SURVEY

KEY: 1 : Poor  2 : Fair  3 : Good  4 : Very Good  5 : Excellent

10. General Information

a. Name at the time of enrolment / Year of Passing: ______________________________

b. Gender

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<th>MALE</th>
<th>FEMALE</th>
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c. UHS Registration Number (if available): ______________________________

d. Programme(s) completed at UHS (please tick the appropriate box(es))

- M. Sc. Nursing
- M.Sc. Medical Lab Technology
- M.Sc. Biomedical Engineering
- M. Phil
- PhD

e. Contact Information (Home / Mobile): ______________________________

f. Email Address: ______________________________

g. Are you presently employed

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<th>YES</th>
<th>NO</th>
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</table>

If YES please specify where: _____________________________________________

h. Would you like to be interested in volunteering your expertise by imparting training or delivering lectures at UHS as visiting faculty?

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<th>YES</th>
<th>NO</th>
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If YES please specify the area: _____________________________________________
i. Additional Academic Qualifications / Certifications (including those in progress)
Most recent one first and also specify (year) and Institution:
1. ______________________________________________________________________
   ______________________________________________________________________
2. ______________________________________________________________________
   ______________________________________________________________________
3. ______________________________________________________________________
   ______________________________________________________________________

11. Academic and Student life at UHS
Reflecting back on your UHS experiences please answer the following questions using the aforementioned KEY:

a. How well did your education at University of Health Sciences prepared you for the current world learning:
   1  2  3  4  5

b. How would you characterize the teaching facilities (classrooms, labs, etc.) at UHS?
   1  2  3  4  5

c. How would you describe the availability of information resources (library, computer access, etc.)?
   1  2  3  4  5

d. Overall, how satisfied are you with your Experience at UHS?
   1  2  3  4  5

e. To what extent do you think your education at UHS contributed to your knowledge, skills and personal development in each of the following areas?

   I. Knowledge
      a. Problem formulation and solving skills
         1  2  3  4  5
      b. Collecting and Analyzing appropriate Data
         1  2  3  4  5
      c. Ability to link theory to practice
         1  2  3  4  5
      d. Ability to design a system component or process
         1  2  3  4  5
      e. Computer Knowledge
         1  2  3  4  5
II. Communication Skills
   a. Oral Communication
   b. Report Writing
   c. Presentation Skills

III. Work Skills
   a. Time management Skills
   b. Judgment
   c. Discipline

IV. Interpersonal Skills
   a. Ability to work in teams
   b. Independent Thinking
   c. Appreciation of Ethical Values
   d. Professional Development

12. Achievements

University of Health Sciences is keen to know the kind of achievements its alumni are making in their respective professions and other fields of interest. Kindly list any recognition or awards received on an organizational, national or international level including Research. Please list most important including (year).

1. ....................................................................................................................
   ....................................................................................................................

2. ....................................................................................................................
   ....................................................................................................................

3. ....................................................................................................................
   ....................................................................................................................

4. ....................................................................................................................
   ....................................................................................................................

5. **General Comments**

Please make any additional comments or suggestions, which you think would help strengthen the programme(s) at UHS. (New courses that you would recommend and courses that you did not gain much from)

____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

__________________________________________________ __________________

**Signature:** _______________  **Date:** _______________

________________________