

Tribhuvan university
Central Department of Hydrology and Meteorology

Tracer Study Questionnaire

Dear Graduate,

*Central Department of Hydrology and Meteorology is establishing a system of tracing its graduates and getting feedback regarding the type of work, further study or other activity you are/were involved in since you completed your study from the institution. The information provided will assist the institution in planning future educational needs. Results of this tracer study will only be presented in summary form and individual responses will be kept **strictly confidential as per the statistical act 2013 BS**. We would, therefore, highly appreciate it if you could complete the following questionnaire and return it to us, at your earliest convenience.*

Thank you for your kind cooperation and support.

1. PERSONAL INFORMATION:

Name:

(Given Name)	(Middle Name)	(Surname/Family Name)
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Present Address:

Permanent Address:

Gender: Male Female Date of Birth: / / (Date Format: DD/Month/Year)

Program Completed: M.Sc. Ph.D Other:.....

Passed Year: (as per transcript's **Passed Year**)

Phone No: (Mobile / Residence / Office) / /

Email ID: /

Electronic Social Network ID:

Facebook: Twitter:

Any other, please specify: ID:

2. EMPLOYMENT INFORMATION:

2.1 Current Employment Status:

Service in an organization.....Self Employed.....Unemployed.....Others

In case of **Service in an organization**: Employer's Details (of the organization you are currently working for):

Name of the Organization:

Type of Organization: Private Public NGO/INGO Government Other:

Address:

Phone Number: Email:

Employment Type:Full time..... Part time

Designation:Posting District.....

Basic Salary/Other facilities:

In the case of Self Employment:

Starting Year: Type of Organization:

Type of work / profession:

2.2 Which of the following best represent major strengths and weaknesses of the institutional program that you attended? (Give number from the range 0-5) Excellent = 5 Very Weak = 0

SN	Particulars	Please tick under the number which best suits your answer					
		0	1	2	3	4	5
1	Relevance of the program to your professional (job) requirements						
2	Teaching / Learning environment						
3	Quality of education delivered						
4	Library facility						
5	Lab facility						
6	Field work						
7	Community work						
8	Extracurricular activities						
9	Problem solving ability						
10	Work placement / attachment / internship						
11	Teacher Student relationship						
12	Administrative Staff Student relationship						
13	Sports facility						
14	Canteen facility						
15	Toilet facility						
16	Other strengths / weaknesses (please specify)						

3. IF PURSUING FURTHER STUDY:

Enrolment Year: (Year/Month)

Program: Level:

University:

Campus/University Address:

4 Please provide your suggestions/recommendations for the betterment of your institution:

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5 What contribution/s you can provide to the institution for its betterment?

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Signature of the graduate