

Employer Feedback Form

Dr. Vijay R. Ghorpade
PRINCIPAL

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Reviewer information

Name of the Company *

Sourbh construction

Name of the Reviewer *

Suresh jadhav

Reviewer Position/Designation *

Owner

Alumni Information(Employee)

Name of the Employee (Full Name) *

Sourbh suresh jadhav

Contact No.(Preferably Whatsapp No.) *

7498571746

Position/Designation *

Site engineer

Department *

Civil Engineering



State your review

Productivity *

Excellent

Good

Fair

Poor

Work Quality *

Excellent

Good

Fair

Poor

Technical Skills *

Excellent

Good

Fair

Poor

Cooperation *

Excellent

Good

Fair

Poor

Attitude *

Excellent

Good

Fair

Poor

Working Relations *

Excellent

Good

Fair

Poor

Creativity *

Excellent

Good

Fair

Poor

Punctuality *

Excellent

Good

Fair

Poor

Communication Skills *

Excellent

Good

Fair

Poor

Any Other Comments:

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