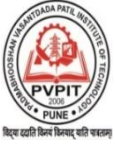


" TSSM'S "



**PADAMBHOOSHAN VASANTDADA PATIL INSTITUTE OF TECHNOLOGY**

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### Feedback From Academic Person

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Year of passing

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Branch

E-mail

Current Addr:

Permanent Addr:

### Details of Higher Studies,(If applicable):

Course Name:

Specialization:

University:

Address:

### WorkInformation:

Employer:

Jobdesignation:

Office phone no:

Official Email:

Fieldofwork:

### Details of Entrepreneurship,(If applicable):

Name of the Organization:

Address:

Products/Services offered:

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