



## Department of CSE- Cyber Security

### GUEST LECTURE FEEDBACK FORM

(Topic - Awareness of Cyber Security Professional As per the industry Standards and the briefing on Cyber Security Training Program)

**Name of the Student:**

**Mail ID:**

**Year/ Semester:**

**Date of Guest Lecture:**

**Contact No:**

1. How was your experience at the Guest Lecture?
2. Did the Guest Lecture was as per your expectation?
3. Kindly describe the knowledge you gained from the Guest Lecturer in few words?
4. How would you rate your overall experience of the Guest Lecture on the scale of 1-5?  
5-Excellent    4-Very Good    3-Good    2-Satisfactory    1-Not Satisfactory
5. Would you recommend this Guest Lecture to your juniors? (Yes/No).  
If No, mention the reasons.

Signature of the Candidate: