

FEED BACK SUMMARY

TRAINING INSTITUTION : :

COURSE No:

COURSE NAME : :

CLASS STRENGTH:

DATE OF THE TRAINING : :

(A) TRAINING SERVICES:

| Sl. No | ITEM | RATING | | |
|---------------|--|-----------|------|------|
| | | EXCELLENT | FAIR | POOR |
| 1 | Trainers constructive response for problem solving | | | |
| 2 | Response of trainers with reference to solving of problems | | | |
| 3 | How do you rate the various working models: • Sufficient • Relevant • Effectiveness | | | |
| 4 | Adequacy of the training programme in terms of • Relevance • Content • Delivery | | | |
| 5 | Library Facility | | | |
| 6 | Study Tour | | | |
| Suggestions: | | | | |
| Action Taken: | | | | |

(B) OTHER SERVICES:

| Sl.No | ITEM | RATING | | |
|---------------|---|-----------|------|------|
| | | EXCELLENT | FAIR | POOR |
| 1 | Hostel Facility | | | |
| 2 | Messing Facility | | | |
| 3 | Sports Facility | | | |
| 4 | How were the other recreational Entertainment / Cultural Facilities | | | |
| 5 | Yoga Training | | | |
| Suggestions: | | | | |
| Action Taken: | | | | |

Signature : :

Name : :

Emp. No. : :