IIT (ISM) Dhanbad PMU

DST-STUTI Project

FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: Uses of Sophisticated Mechanical Characterization Instruments

Date and Duration of Training: 04th – 10th July, 2022 (07 days)

Name of the Institute where Training has been conducted: IIT (ISM) Dhanbad

Please rate the Programme components on a scale of 10 to 1 (10 indicates 'Excellent/Most Effective' and 1 indicates 'Poor/ Least Effective') wherever necessary.

S. No.	Content	Rating									
		1	2	3	4	5	6	7	3	9	10
1.	Overall grading of the Programme with reference to relevance of course, module/ content etc.										✓
2.	Overall grading of the facilities provided by the institute, i.e., Hostel, Mess, Class Rooms, Transport/infrastructure etc.										✓
3.	Overall grading of the faculty members conducting the training										✓
4.	How do you rate the overall training methodology										✓
5.	How far the field visit is relevant and related to your research study										✓
6.	Usefulness of this training in your current role										✓
7.	Usefulness of this training in future work/job you may handle										✓
8.	How far have you benefitted from interaction with the fellow participants of the training										✓
9.	How far the course material supplied relevant and related to the training curriculum										✓
10.	Overall grading of the process of training										✓
11.	Your recommendation to your peers/ colleagues for the training Programme										✓

Any other suggestions/ observations, if any-

Name of the Participant : Amit Kumar

Course/ Designation : Research Scholar

University/ Institute : GLA University, Mathura

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Phone No. : 8755709486

Amit Kumar

(Name of the Participant)

FEEDBACK FORM FOR TRAINING PROGRAM

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8.	How far have you benefitted from interaction with the fellow participants of the training									✓	
9.	How far the course material supplied relevant and related to the training curriculum									✓	
10.	Overall grading of the process of training									✓	
11.	Your recommendation to your peers/ colleagues for the training Programme									✓	

Any other suggestions/ observations, if any-

Name of the Participant : Mr. Vijay Kumar
Course/ Designation : Research Scholar
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VIJAY KUMAR

(Name of the Participant)

FEEDBACK FORM FOR TRAINING PROGRAM

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7.	Usefulness of this training in future work/job you may handle										✓
8.	How far have you benefitted from interaction with the fellow participants of the training									✓	
9.	How far the course material supplied relevant and related to the training curriculum										✓
10.	Overall grading of the process of training										✓
11.	Your recommendation to your peers/ colleagues for the training Programme										✓

Any other suggestions/ observations, if any-

Very informative and innovative session.

Kumar Kanishka

(Name of the Participant)

Name of the Participant : Kumar Kanishka
Course/ Designation : Research Scholar
University/ Institute : BIT Mesra
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Phone No. : 9199996639

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10.	Overall grading of the process of training									✓	
11.	Your recommendation to your peers/ colleagues for the training Programme										✓

Any other suggestions/ observations, if any- Overall it was awesome but as far as my experience concerned at least there should be a one industrial/ CSIR visit related to current research trend going on. for example → In IIT-K on I.C. Engine Advancement in topic STTP they conduct RDSO visit. Thanking You. * I enjoyed a lot training

10/07/2022

(Name of the Participant)

UTKARSH PANDEY.
Research Scholar.
P & I.E., BIT, Mesra.

9907654004

FEEDBACK FORM FOR TRAINING PROGRAM

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10.	Overall grading of the process of training								✓		
11.	Your recommendation to your peers/ colleagues for the training Programme									✓	

Any other suggestions/ observations, if any- *Sessions were informative, as fas as workshop/training is concerned contents were enough.*

KARTIK CHANDRA BHAGAT
NIAMT/NIFFT, RANCHI
(Name of the Participant)

Name of the Participant   :   Kartik Chandra Bhagat
Course/ Designation   :   Research Scholar
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Phone No.   :   6200785475

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9.	How far the course material supplied relevant and related to the training curriculum										✓
10.	Overall grading of the process of training										✓
11.	Your recommendation to your peers/ colleagues for the training Programme										✓

Any other suggestions/ observations, if any- Please make a provision for joining STUTI program once again as the agenda for training program is different to the other programmes so, that we can train in versitile fields.

(Name of the Participant)
Mukul Saxena

Name of the Participant   :   Mukul Saxena
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FEEDBACK FORM FOR TRAINING PROGRAM

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9.	How far the course material supplied relevant and related to the training curriculum										✓
10.	Overall grading of the process of training										✓
11.	Your recommendation to your peers/ colleagues for the training Programme										✓

Any other suggestions/ observations, if any-

Name of the Participant : Vikash Kumar
Course/ Designation : Research Scholar
University/ Institute : Jadavpur University
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Phone No. : 8544119573

Vikash Kumar
(Name of the Participant)

FEEDBACK FORM FOR TRAINING PROGRAM

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7.	Usefulness of this training in future work/job you may handle								✓		
8.	How far have you benefitted from interaction with the fellow participants of the training									✓	
9.	How far the course material supplied relevant and related to the training curriculum									✓	
10.	Overall grading of the process of training										✓
11.	Your recommendation to your peers/ colleagues for the training Programme										✓

Any other suggestions/ observations, if any- Priority should be provided to trainees of DST for further use of instruments by providing discount in case trainees wants to use the instruments/ apparatus for their research program/ work.

BIPLAB BARAN MANDAL

(Name of the Participant)

Name of the Participant : Biplab Baran Mandal
Course/ Designation : Research Scholar
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Phone No. : 6289551994

FEEDBACK FORM FOR TRAINING PROGRAM

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5.	How far the field visit is relevant and related to your research study								✓		
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8.	How far have you benefitted from interaction with the fellow participants of the training										✓
9.	How far the course material supplied relevant and related to the training curriculum								✓		
10.	Overall grading of the process of training										✓
11.	Your recommendation to your peers/ colleagues for the training Programme										✓

Any other suggestions/ observations, if any- There should be a priority and discount provided to the DST trainees for future use of the machines and equipments. Because most of the equipment using charges are very high for scholars like us.

Chandra Sekhar Rauta
(Name of the Participant)

Name of the Participant : Chandra Sekhar Rauta
Course/ Designation : Research Scholar
University/ Institute : Jadavpur University
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Phone No. : 77353358885

FEEDBACK FORM FOR TRAINING PROGRAM

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10.	Overall grading of the process of training										✓
11.	Your recommendation to your peers/ colleagues for the training Programme										✓

Any other suggestions/ observations, if any-

Please conduct more such type of programs in future.

Name of the Participant : Suryank Dwivedi
Course/ Designation : Research Scholar
University/ Institute : IIT (ISM) Dhanbad
Email Id : suryank.17dr000604@mech.ism.ac.in
Phone No. : 7836803233

SURYANK DWIVEDI

(Name of the Participant)

FEEDBACK FORM FOR TRAINING PROGRAM

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10.	Overall grading of the process of training										✓
11.	Your recommendation to your peers/ colleagues for the training Programme										✓

Any other suggestions/ observations, if any- No.

Annada Prasad Moharana

(Name of the Participant)

Name of the Participant : Annada Prasad Moharana
Course/ Designation : Research Scholar
University/ Institute : IIT (ISM) Dhanbad
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Phone No. : 7978303896

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11.	Your recommendation to your peers/ colleagues for the training Programme									✓	

Any other suggestions/ observations, if any-

Name of the Participant : Ravindra Kumar
Course/ Designation : Research Scholar
University/ Institute : NIT Durgapur
Email Id : ravindra.mech015@gmail.com
Phone No. : 7004675915

Ravindra Kumar

(Name of the Participant)

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11.	Your recommendation to your peers/ colleagues for the training Programme										✓

Any other suggestions/ observations, if any-

Both practical & theoritical aspects were covered.

Shrushti Maheshwari

(Name of the Participant)

Name of the Participant : MS. Shrushti Maheshwari
Course/ Designation : Research Scholar
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Phone No. : 8878720996

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11.	Your recommendation to your peers/ colleagues for the training Programme										✓

Any other suggestions/ observations, if any-

Name of the Participant   :   Kashif Hasan Kazami
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Phone No.   :   8439122545

KASHIF HASAN KAZMI

(Name of the Participant)

FEEDBACK FORM FOR TRAINING PROGRAM

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10.	Overall grading of the process of training										✓
11.	Your recommendation to your peers/ colleagues for the training Programme										✓

Any other suggestions/ observations, if any-

Need more training on hands-on related to characterizatio

Ashish 10/7/22
(Name of the Participant)

Dr. Ashish kumar srivastava.
G.L. Bajaj ITTM.

Name of the Participant	:	Dr. Ashish Kumar Srivasatava
Course/ Designation	:	Associate Professor
University/ Institute	:	G.L. Bajaj Institute of Technology & Management,
Email Id	:	ashish7185@gmail.com
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10.	Overall grading of the process of training										✓
11.	Your recommendation to your peers/ colleagues for the training Programme										✓

Any other suggestions/ observations, if any-

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Email Id : pankajkumar@sru.edu.in
Phone No. : 86034338501

Dr. Pankaj Kumar

(Name of the Participant)

FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: Uses of Sophisticated Mechanical Characterization Instruments

Date and Duration of Training: 04th – 10th July, 2022 (07 days)

Name of the Institute where Training has been conducted: IIT (ISM) Dhanbad

Please rate the Programme components on a scale of 10 to 1 (10 indicates 'Excellent/Most Effective' and 1 indicates 'Poor/ Least Effective') wherever necessary.

S. No.	Content	Rating									
		1	2	3	4	5	6	7	8	9	10
1.	Overall grading of the Programme with reference to relevance of course, module/ content etc.										✓
2.	Overall grading of the facilities provided by the institute, i.e., Hostel, Mess, Class Rooms, Transport/infrastructure etc.										✓
3.	Overall grading of the faculty members conducting the training										✓
4.	How do you rate the overall training methodology										✓
5.	How far the field visit is relevant and related to your research study							✓			
6.	Usefulness of this training in your current role								✓		
7.	Usefulness of this training in future work/job you may handle									✓	
8.	How far have you benefitted from interaction with the fellow participants of the training										✓
9.	How far the course material supplied relevant and related to the training curriculum										✓
10.	Overall grading of the process of training										✓
11.	Your recommendation to your peers/ colleagues for the training Programme										✓

Any other suggestions/ observations, if any-

Name of the Participant   : Akhileshwar Mani Tripathi
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Phone No.   : 9560147060

Akhileshwar Mani Tripathi
(Name of the Participant)

FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: Uses of Sophisticated Mechanical Characterization Instruments

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9.	How far the course material supplied relevant and related to the training curriculum										✓
10.	Overall grading of the process of training										✓
11.	Your recommendation to your peers/ colleagues for the training Programme										✓

Any other suggestions/ observations, if any-

Name of the Participant   : Dr. Manowar Hussain
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DH. Manowar Hussain

(Name of the Participant)

10/07/22

FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: Uses of Sophisticated Mechanical Characterization Instruments

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5.	How far the field visit is relevant and related to your research study									✓	
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9.	How far the course material supplied relevant and related to the training curriculum										✓
10.	Overall grading of the process of training										✓
11.	Your recommendation to your peers/ colleagues for the training Programme										✓

Any other suggestions/ observations, if any-

I am so satisfied with the workshop, any my suggestion is that this kind of Ns related to thermal field must be conducted soon

(Name of the Participant)

Summaiya Javed

Name of the Participant : Summaiya Javed
Course/ Designation : Research Scholar
University/ Institute : IET Lucknow
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Phone No. : 9651363739

FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: Uses of Sophisticated Mechanical Characterization Instruments

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3.	Overall grading of the faculty members conducting the training									✓	
4.	How do you rate the overall training methodology								✓		
5.	How far the field visit is relevant and related to your research study							✓			
6.	Usefulness of this training in your current role								✓		
7.	Usefulness of this training in future work/job you may handle							✓			
8.	How far have you benefitted from interaction with the fellow participants of the training								✓		
9.	How far the course material supplied relevant and related to the training curriculum									✓	
10.	Overall grading of the process of training							✓			
11.	Your recommendation to your peers/ colleagues for the training Programme							✓			

Any other suggestions/ observations, if any-

Name of the Participant : Awadhesh Prasad
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Phone No. : 9801208521

Awadhesh Prasad
(Name of the Participant)

FEEDBACK FORM FOR TRAINING PROGRAM

आज़ादी का
अमृत महोत्सव

Title of the Training Programme: Uses of Sophisticated Mechanical Characterization Instruments

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5.	How far the field visit is relevant and related to your research study									✓	
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9.	How far the course material supplied relevant and related to the training curriculum										✓
10.	Overall grading of the process of training										✓
11.	Your recommendation to your peers/ colleagues for the training Programme										✓

Any other suggestions/ observations, if any- NA.

Name of the Participant   : Abhishek Haldar
Course/ Designation   : Assistant Professor
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Phone No.   : 9531755244

Abhisek Haldar.
(Name of the Participant)

FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: Uses of Sophisticated Mechanical Characterization Instruments

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3.	Overall grading of the faculty members conducting the training										✓
4.	How do you rate the overall training methodology										✓
5.	How far the field visit is relevant and related to your research study										✓
6.	Usefulness of this training in your current role										✓
7.	Usefulness of this training in future work/job you may handle										✓
8.	How far have you benefitted from interaction with the fellow participants of the training									✓	
9.	How far the course material supplied relevant and related to the training curriculum										✓
10.	Overall grading of the process of training										✓
11.	Your recommendation to your peers/ colleagues for the training Programme										✓

Any other suggestions/ observations, if any-

Name of the Participant   :   Gaurab kumar Ghosh
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Phone No.   :   9439028743

Gaurab Kumar Ghosh

(Name of the Participant)

FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: Uses of Sophisticated Mechanical Characterization Instruments

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3.	Overall grading of the faculty members conducting the training										✓
4.	How do you rate the overall training methodology										✓
5.	How far the field visit is relevant and related to your research study										✓
6.	Usefulness of this training in your current role										✓	
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8.	How far have you benefitted from interaction with the fellow participants of the training										✓
9.	How far the course material supplied relevant and related to the training curriculum										✓
10.	Overall grading of the process of training										✓
11.	Your recommendation to your peers/ colleagues for the training Programme										✓	

Any other suggestions/ observations, if any-

Name of the Participant : Ritesh Kumar Patel
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University/ Institute : IGIT, Sarang
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Phone No. : 7537954671

RITESH KUMAR PATEL

(Name of the Participant)

FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: Uses of Sophisticated Mechanical Characterization Instruments

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9.	How far the course material supplied relevant and related to the training curriculum										✓
10.	Overall grading of the process of training										✓
11.	Your recommendation to your peers/ colleagues for the training Programme										✓

Any other suggestions/ observations, if any- NA.

Name of the Participant : Anand A. Murmu
Course/ Designation : Assistant Professor
University/ Institute : NIAMT, Ranchi
Email Id : anand.murmu@gmail.com
Phone No. : 7970887657

(Name of the Participant)

FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: Uses of Sophisticated Mechanical Characterization Instruments

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4.	How do you rate the overall training methodology								✓		
5.	How far the field visit is relevant and related to your research study								✓		
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9.	How far the course material supplied relevant and related to the training curriculum								✓		
10.	Overall grading of the process of training								✓		
11.	Your recommendation to your peers/ colleagues for the training Programme									✓	

Any other suggestions/ observations, if any- Relevant hand copies are required for future Reference.

Anupam Mukherjee 10/07/22
(Name of the Participant)

(Mob 9163027666)

Name of the Participant	:	Anupam Mukherjee
Course/ Designation	:	Foreman mechanical (Group A officer. Govt of w.b)
University/ Institute	:	Central Culcutta Polytechnic, W.B.
Email Id	:	anupammukherjee200@gmail.com
Phone No.	:	9163027666

FEEDBACK FORM FOR TRAINING PROGRAM

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4.	How do you rate the overall training methodology									✓	
5.	How far the field visit is relevant and related to your research study									✓	
6.	Usefulness of this training in your current role								✓		
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9.	How far the course material supplied relevant and related to the training curriculum									✓	
10.	Overall grading of the process of training										✓
11.	Your recommendation to your peers/ colleagues for the training Programme										✓

Any other suggestions/ observations, if any-

Name of the Participant : Prof. Tapas Chakraborty
Course/ Designation : Professor
University/ Institute : Saroj Mohan Institute of Technology, Hoogly
Email Id : tapas260465@gmail.com
Phone No. : 8240907209

Tapas Chakraborty
10/7/2022
(Name of the Participant)

FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: Uses of Sophisticated Mechanical Characterization Instruments

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10.	Overall grading of the process of training								✓		
11.	Your recommendation to your peers/ colleagues for the training Programme									✓	

Any other suggestions/ observations, if any-

Name of the Participant : Prakash Kumar
Course/ Designation : Research Scholar
University/ Institute : BIT, Mesra
Email Id : phdpe10053.20@bitmesra.ac.in
Phone No. : 7903276660

10/07/22
PRAKASH KUMAR
(Name of the Participant)

FEEDBACK FORM FOR TRAINING PROGRAM

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Any other suggestions/ observations, if any-

Name of the Participant	:	Suresh Pratap
Course/ Designation	:	Research Scholar
University/ Institute	:	BIT, Mesra
Email Id	:	phdpe10002.20@bitmesra.ac.in
Phone No.	:	7004880712

Suresh Pratap

(Name of the Participant)

FEEDBACK FORM FOR TRAINING PROGRAM

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10.	Overall grading of the process of training										✓
11.	Your recommendation to your peers/ colleagues for the training Programme										✓

Any other suggestions/ observations, if any-

Dr. Jay Prakash Srivastava
(Name of the Participant)

Name of the Participant : Dr. Jay Prakash Srivastava
Course/ Designation : Assistant Professor
University/ Institute : SR University
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Phone No. : 9031102477

FEEDBACK FORM FOR TRAINING PROGRAM

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11.	Your recommendation to your peers/ colleagues for the training Programme										✓

Any other suggestions/ observations, if any-

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(Name of the Participant)
(Dr Rabesh Kr. Singh)