



FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: High & not mach Centers for Computer integrated mount.

Date and Duration of Training: 28 Hov - 4 dec, 2022

Name of the Institute where Training has been conducted: BITS Pilani, Pilani Campus.

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.	6-1-1					Rati	ng				
No.	Content	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.						\$12.8°				V
2.	Overall grading of the facilities provided by the institute, i.e., Hostel, Mess, Class Rooms, Transport/infrastructure etc.									V	
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									V	
9.	How far the course material supplied relevant and related to the training curriculum										
10.	Overall grading of the process of training										V
11.	Your recommendation to your peers/ colleagues for the training Programme						E MANAGE	Less-se			2

Any other suggestions/ observations, if any-

Excellent & it is usefulfor my Current work.

(Name of the Participant)

Name of the Participant Course/ Designation

University/ Institute

Email Id Phone No. : Mr. Chitranjan Kumar

: Assistant Professor

: BKBIET, Pilani

· chitranjan.cusat@gmail.com





FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: High end Machining Centers goz Computer integraded Manyaduling

Date and Duration of Training: 28 Nov- 04 pc, 2022

Name of the Institute where Training has been conducted: BITS, Pilani

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.	Contout					Rati	ing				
No.	Content	1	2	3	4	5	6	7	8	9	1
1.	Overall grading of the Programme with reference to relevance of course, module/content etc.		West of							~	
2.	Overall grading of the facilities provided by the institute, i.e., Hostel, Mess, Class Rooms, Transport/infrastructure etc.										V
3.	Overall grading of the faculty members conducting the training				Sea ser	erogre		1000			V
4.	How do you rate the overall training methodology									/	
5.	How far the field visit is relevant and related to your research study										V
6.	Usefulness of this training in your current role									V	
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									V	
9.	How far the course material supplied relevant and related to the training curriculum										V
10.	Overall grading of the process of training							1011			V
11.	Your recommendation to your peers/ colleagues for the training Programme						e se		agrang.		

Any other suggestions/ observations, if any-

Divesh Kr. Rohilla

(Name of the Participant)

Name of the Participant Course/ Designation University/Institute **Email Id** Phone No.

: Mr. Divesh Kumar Rohilla

: Assistant Professor

· BKBIET, Pilani

diveshrohilla@gmail.com

FEEDBACK FORM FOR TRAINING PROGRAM IIT (ISM) Dhanbad PMU Programme: High DST-STUTI Project be higher (CM)



Date and Duration of Training: 28/11/202 - UN12/201

Name of the Institute where Training has been conducted:

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					Rat	ing				
110		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.								0		10
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	CAVIEW -							V		-
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									<u> </u>	
8.	How far have you benefitted from interaction with the fellow participants of the training								<u></u>		
9.	How far the course material supplied relevant and related to the training curriculum										
0.	Overall grading of the process of training										
11.	Your recommendation to your peers/ colleagues for the training Programme		(2-10-18)					1			Service of

Any other suggestions/ observations, if any-

(Name of the Participant)

Name of the Participant Course/ Designation University/ Institute

: Assistant Professor : BKBIET, Pilani

: Dr. Shilpesh R. Rajpurohit

Email Id Phone No. : shilpeshrajpurohit@gmail.com





FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme:

High End Machining centres for compuler Integrated Manufacturing "> 28 NOV-4 Dec, 2022.

Date and Duration of Training:

Name of the Institute where Training has been conducted: BITS pilani

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.	Content					Rati	ng		SVE .		
No.	Content	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.						Section 1	Stark.			/
3.	Overall grading of the faculty members conducting the training										~
4.	How do you rate the overall training methodology										V
5.	How far the field visit is relevant and related to your research study										V
6.	Usefulness of this training in your current role										/
7.	Usefulness of this training in future work/job you may handle										V
8.	How far have you benefitted from interaction with the fellow participants of the training										W
9.	How far the course material supplied relevant and related to the training curriculum										V
10.	Overall grading of the process of training			Name of Street	la section	September 1	No.	4219 (SH)		AGE OF	N
11.	Your recommendation to your peers/ colleagues for the training Programme										V

That type of purgranme must be arrangedent again for maximum benefit".

MD JAWES IGBAL (Name of the Participant)

Name of the Participant Course/ Designation University/Institute

: Mr. Md. Jawed Iqbal : Research Scholar

: BITS Pillani, Pillani Campus

· P20220048@pillani.bitspillani.ac.in

Email Id Phone No.





FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: HIGH END MACHINING CENTERS FOR

COMPUTER INTEGRATED MANUFACTURING

Date and Duration of Training: 28/11/2022 -4/12/2022 (ONE WEEK)

Name of the Institute where Training has been conducted: BITS PILANI, PILANI

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.	Conton					Rati	ng				
No.	Content	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.										V
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						isamia.				V
4.	How do you rate the overall training methodology										V
5.	How far the field visit is relevant and related to your research study									~	
6.	Usefulness of this training in your current role									V	_
7.	Usefulness of this training in future work/job you may handle									1	_
8.	How far have you benefitted from interaction with the fellow participants of the training										V
9.	How far the course material supplied relevant and related to the training curriculum										L
10.	Overall grading of the process of training										-
11.	Your recommendation to your peers/ colleagues for the training Programme			Arriva in the second				policial.			1

Any other suggestions/ observations, if any-

It is a great Experience and learning.

And I wish to attend this type

of programme to Enhance mey

Knowledge in future also.

: JIET Jodhpur

PAWAN KUMAR BISSA (Name of the Participant)

Name of the Participant Course/ Designation

: Mr. Pawan Kumar Bissa : Assistant Professor

University/Institute

: pawan.bissa@jiet.jodhpur.ac.in

Email Id Phone No. - 9649292177





FEEDBACK FORM FOR TRAINING PROGRAM

Date and Duration of Training: 28 November - 4 200 2002	0
Date and Duration of Training: 28 November - 4 Deo 20072	
Name of the Institute where Training has been conducted: BITS Pilawi Pilawi Campu	(

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					Rati	ing				
140.		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.					10. 100					V
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	E-1908	NATION .	v same a		STATES S	Parties.			V	_
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										V
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								V	/	
9.	How far the course material supplied relevant and related to the training curriculum										~
0.	Overall grading of the process of training								25 S		
1	Your recommendation to your peers/ colleagues for the training Programme										

Any other suggestions/ observations, if any-

St Mac possitive experience and mice learning.

Neeroj Kumar skorme

(Name of the Participant)

Name of the Participant Course/ Designation

University/Institute

Email Id Phone No. : Mr. Neeraj Kumar Sharma

: Assistant Professor

: JIET, Jodhpur

: neeraj.ilw@gmail.com





FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: MIGH END MACHINING CENTERS FOR COMPUTER INTEGRATED

MANUFACTURING

Date and Duration of Training: ONE WEEK (28-11-2022 to 04-12-2022)

Name of the Institute where Training has been conducted: BITS, Pilani

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					Rat	ing				
180.		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.							7487	/		
2.	Overall grading of the facilities provided by the institute, i.e., Hostel, Mess, Class Rooms, Transport/infrastructure etc.								V		
3.	Overall grading of the faculty members conducting the training	W.P.B.	Marray	Smerror.			Quality.			/	
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							<u> </u>			
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-

Marish Kumar (Name of the Participant)

Name of the Participant Course/ Designation

University/Institute Email Id

Phone No.

: Mr. Harish Kumar : Research Scholar

: IIT Delhi

: harishmechiitd@gmail.com

:9711166740





FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: High End Machining Centers for Computer Integrated of

Date and Duration of Training: 28 Nov 2022 to 04 Dec 2022

Name of the Institute where Training has been conducted: BITS Pilani (Raj.)

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.	Content					Rat	ing				
No.	Content	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.										V
2.	Overall grading of the facilities provided by the institute, i.e., Hostel, Mess, Class Rooms, Transport/infrastructure etc.										V
3.	Overall grading of the faculty members conducting the training		0.5				19.318			restore.	V
4.	How do you rate the overall training methodology										V
5.	How far the field visit is relevant and related to your research study										V
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								V		
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									morph.	

Any other suggestions/ observations, if any-

This type of hands-on training may be extended to two or more weekes.

(Name of the Participant)

[ANKUR]

Name of the Participant Course/ Designation University/ Institute Email Id Phone No. : Mr. Ankur

:Research Scholar

· BML Munjal Univesity, Haryana

ankur.pd2a@bmu.edu.in





FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: HIGH END MACHINING CENTER FOR COMPUTER INTEGRATED MANUFAC-

Date and Duration of Training: 28/11/2022 to 04/12/2022 [070A45]

Name of the Institute where Training has been conducted: BITS PILANI, PILANI [RAJASTHAN]

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.	Content					Rat	ing				
No.	Content	1	2	3	4	5	6	7	8	9	1(
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				Approprie				ealtone (a)	anteres E	
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					<u> </u>					
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			ent-resid							

Any other	suggestions/	observations.	if any
Am other	SUPPLSHOUN	OUNCLVATIONS.	11 2111

1) Improve	F00 1	quality	4	varieties	Provided.
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2) Next time Please Privide actual hands on training on machines just not the demonstration

3) Also invite Speakers from renowned only. RAHUL THAKUR institutions like ITT's. This time only

(Name of the Participant) 1 speaker from ITT & rest all From BIT's only.

Name of the Participant: Mr. Rahul Thakur are from our side in stitution. Course/ Designation have a Assistant Professor Parts are from our side of manimum are

University/ Institute ow BIT: Medicaps University Indore

Email Id Phone No. : rahul.thakur01@medicaps.ac.in 9713553770





FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: "High End Machining Centers for Compoter Integrated Manufacturing"

Date and Duration of Training: 28-11-2022 to 04-12-2022 \$ 07 Days

Name of the Institute where Training has been conducted: TSITS PILANI

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.	Content					Rat	ing				
No.	Content	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.						~		A (ASS)		
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					53 10160	<u></u>	2-1734	BROK	545 F (10)	15-81
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						<u></u>				
7.	Usefulness of this training in future work/job you may handle		ener				~				
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						<u></u>				
10.	Overall grading of the process of training	in car				10000	-				Series Series
11.	Your recommendation to your peers/ colleagues for the training Programme										

Any other suggestions/observations, if any- 1) 20% session should be conducted by Industri	ialist
2) 40% Session should be delivered by Pool; 3) SCI Papers (soft & Hard copy) on the by one Pool; (atleast two in number) 4)	of IIT only topic delines

Name of the Participant Course/ Designation University/ Institute Email Id

Phone No.

Mr. Anshuman Purohit Assistant Professor

Medi-Caps University Indore

. anshuman.purohit@medicaps.ac.in





FEEDBACK FORM FOR TRAINING PROGRAM

High End Marchining Centers for computer Integrated manufacturing Title of the Training Programme:

Date and Duration of Training:

28 MOV to 4 Dec 2022

Name of the Institute where Training has been conducted: BITS-PILAMI PILAMI

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.	Content					Rati	ing				
No.	Content	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.										1
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	7									1
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										V
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										V
10.	Overall grading of the process of training	Shirt	annie.	in principal		Walter St	alescent.	-	eses plan	and the	~
11.	Your recommendation to your peers/ colleagues for the training Programme										V

Any other suggestions/ observations, if any-

ame of the Participant) KUMAR

Name of the Participant Course/ Designation University/ Institute **Email Id** Phone No.

: Mr. Sumit Kumar :Assistant Professor : SLSET, Kichha (UK) sumitk233@gmail.com .9997794595





FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme:

Date and Duration of Training:

Name of the Institute where Training has been conducted:

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.	Content					Rat	ing				
No.		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.					unit M	1.550				~
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			Seve-	grewer.	(1) (A) (A) (A) (A) (A) (A) (A) (A) (A) (A		eyemine a	Ref ally	59/5/	V
4.	How do you rate the overall training methodology										~
5.	How far the field visit is relevant and related to your research study										1
6.	Usefulness of this training in your current role										W
7.	Usefulness of this training in future work/job you may handle										<u></u>
8.	How far have you benefitted from interaction with the fellow participants of the training								V		
9.	How far the course material supplied relevant and related to the training curriculum									~	
10.	Overall grading of the process of training										1
11.	Your recommendation to your peers/ colleagues for the training Programme										~

Any other suggestions/ observations, if any-

(Name of the Participant)
(Shall-drey Yaren)

Name of the Participant Course/ Designation

: Mr. Shailendra Pawanr: Research Scholar

University/ Institute

: BITS Pillani, Pillani Campus : p20170402@pilani.bitspilani.ac.in

Email Id Phone No.





FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: HIGH END MACHINING CENTERS FOR COMPUTER INTEGRATED

MANUFACTURING

Date and Duration of Training:

28 NOV - 04 DEC, 2027

Name of the Institute where Training has been conducted: BITS Pilani

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.	G11					Rati	ng				
No.	Content	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.	in the					twist.	Vers U.S.			/
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				CONTRACT.				See SA	NE GA	/
4.	How do you rate the overall training methodology	Serve 1								/	
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				6530.40						~

Any other suggestions/ observations, if any-

We need more Practical Session [Hends on toining] individually, that will helpful to explore our Knowledge in your higher End Machine's.

S. RAJAMAHENDRAN (Name of the Participant)

Name of the Participant Course/ Designation

University/Institute

Email Id Phone No. : Mr. Rajamahendran S

: Assistant Professor

: DMI College of Engineering Chennai

ezekiemahi@gmail.com





FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: Date and Duration of Training:	High End	Madining Centers	for Computer Mande
Date and Duration of Training:	28/11/2022	to 04/12/2022	(7 days) -turly.

Name of the Institute where Training has been conducted: BITS Pilani, Pilani Campus, Rajas than, India. Please rate the Programme components on a scale of 10 to 1 (10 indicates 'Excellent Effective' and 1 indicates 'Poor/ Least Effective') wherever necessary.

S.	Content					Rati	ing				
No.	Content	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			ARV.						/	
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- A metrology facility was by
not incorporated in the sessions (Mithleyo Centre
for Advanced Measurement), (JinGEL, (Joint-indogerman lab))
(and Johnson Centrols Smart buildiglab) Dr. MANIKANDAN H

(Name of the Participant)

Name of the Participant Course/ Designation

University/Institute

Email Id Phone No. : Dr. Manikandan H

: Professor

Manglam College of Engineering Kerala

manikandan.h@gmail.com





FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: DST-STUTT - 2022

Date and Duration of Training: 04/12/22, 7 days (28/11/22 - 04/12/22)

Name of the Institute where Training has been conducted: BTTS PILANT

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.						Rati	ng				
No.	Content	1	2	3	4	5	6	7	8	9	1(
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						Surfece	SECONDARIA	RWESS.	970	~
4.	How do you rate the overall training methodology				No. 3-1				/		
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				en la maria de la maria della		19474		SHER	/	

Any other suggestions/ observations, if any-

(Name of the Participant)

Name of the Participant Course/ Designation

University/ Institute

Email Id Phone No. : Mr. Varun Kumar

: Research Scholar

NIT Patna

Varunkrjbad@gmail.com





FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: One - week hands -on training works hop m HIGH END MACHINING CENTERS FOR COMPUTED INTEGRATED Date and Duration of Training: 28.11.2022 to 4.12.2022 MANUFACTURING

Name of the Institute where Training has been conducted: BITS Pilani, Pilani Campw.

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.						Rati	ng				
No.	Content	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.								V	/	
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								A Second	Section 1	/
4.	How do you rate the overall training methodology					200				V	
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	America									/

Any other suggestions/ observations, if any-

Nice program.

(Name of the Participant)

Name of the Participant)

M. Mohamed Anthelian

Name of the Participant

: Mr. M. Mohamed Ariffuddeen

: Associate Professor

: SNS College of Technology, Coimboture

: mohamed.m.mehc@snsct

Course/ Designation University/Institute

Email Id

Phone No.





FEEDBACK FORM FOR TRAINING PROGRAM

Date and Duration of Training: 28 NOV. to 4 Dec. 2022

Name of the Institute where Training has been conducted: BITS PILANI

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.						Rati	ng				
No.	Content	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.										1
3.	Overall grading of the faculty members conducting the training										2
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										V
10.	Overall grading of the process of training				in the same						V
11	Your recommendation to your peers/ colleagues for the training Programme										~

Any other suggestions/ observations, if any-

- No -

Name of the Participant Course/ Designation

University/ Institute

Email Id Phone No. : Mr. Dheeraj Soni

: Assistant Professor

: SS College of Engineering, Kota

: dheeraj.soni10@gmail.com

7014908340

(Name of the Participant)





FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: High and multiple CIM.

Date and Duration of Training: 28 NOV - 4 Dec.

Name of the Institute where Training has been conducted:

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.						Rati	ng				
No.	Content	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.										V
3.	Overall grading of the faculty members conducting the training	energies (Constitution of the Constitution of	SIUSSE					ananaha		e m	V
4.	How do you rate the overall training methodology										V
5.	How far the field visit is relevant and related to your research study										~
6.	Usefulness of this training in your current role										V
7.	Usefulness of this training in future work/job you may handle										V
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										V
10.	Overall grading of the process of training										V
11.	Your recommendation to your peers/ colleagues for the training Programme	Richard Market									/

Any other suggestions/ observations, if any-

(Name of the Participant)

Pronomka Bothaky

Name of the Participant Course/ Designation

University/ Institute

Email Id Phone No. : Ms. Pronamika Borthakur

: Research Scholar

: BITS Pillani, Pillani Campus

p20220044@pillani.bitspillani.ac.in





FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: High End machining Centers CIM"

Date and Duration of Training: 28/11/2022 to 06/12/2022

Name of the Institute where Training has been conducted: BITS, Pilani

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.						Rati	ng				
No.	Content	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.		March Co.					٩			
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								/	P Page	1 septim
4.	How do you rate the overall training methodology							V			
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							V			
10	. Overall grading of the process of training								V		
11	Your recommendation to your peers/ colleagues for the training Programme								V		

MIL Any other suggestions/ observations, if any-

Name of the Participant Course/ Designation

University/Institute

Email Id Phone No. : Dr. Aniruddha Maruti Nikalje

:Associate Professor

: Govt. College of Engineering Aurangabad

:amnikalje@yahoo.com





FEEDBACK FORM FOR TRAINING PROGRAM (DST-STUTI)

Title of the Training Programme: High end machining centers for computer 20 tegrated room ufacturing Date and Duration of Training: 28/11/22 to 04/12/22 (7days)

Name of the Institute where Training has been conducted: BITS Piland

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.	G-11					Rati	ng				
No.	Content	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.								W SA	V	
2.	Overall grading of the facilities provided by the institute, i.e., Hostel, Mess, Class Rooms, Transport/infrastructure etc.										V
3.	Overall grading of the faculty members conducting the training				SEA SE		Tree vis		Wileson Marie Ma Marie Marie Marie Marie Marie Marie Marie Marie Marie Marie Marie Marie Marie Marie Marie Marie Marie Marie Ma Marie Marie Marie Marie Marie Marie Marie Marie Marie Marie Marie Marie Ma Ma Ma Ma Ma Marie Ma Ma Marie Ma Ma Ma Ma Ma Ma Ma Ma Ma Ma Ma Ma Ma		V
4.	How do you rate the overall training methodology										
5.	How far the field visit is relevant and related to your research study									w	
6.	Usefulness of this training in your current role										V
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									V	
9.	How far the course material supplied relevant and related to the training curriculum									V	
10.	Overall grading of the process of training									V	1
11.	Your recommendation to your peers/ colleagues for the training Programme		ALAYS)							じ	

Any other suggestions/ observations, if any-

Dr. S. K. Das.

(Name of the Participant)

Name of the Participant Course/ Designation University/Institute

Email Id Phone No. Dr. Sangram Keshari Das

:Assistant Professor

: Banasthali Vidyapith University :sangramkesharidas@banasthali.in





FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: High End Machining Control of Computer

Date and Duration of Training: 28-41-2022 -04-12-22

Name of the Institute where Training has been conducted: RITS, PILANI, RAJESTHAN

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.						Rati	ng				
No.	Content	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			Option in the	MAC ST			uma a			V
4.	How do you rate the overall training methodology										~
5.	How far the field visit is relevant and related to your research study										V
6.	Usefulness of this training in your current role										1
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										V
11	Your recommendation to your peers/ colleagues for the training Programme					NA HARA					~

Any other suggestions/ observations, if any- overall all the programe argonized very rice way. It's Really asolul for perferpents. Theres to son all provide Such this opportunities to attend this program.
(Name of the Participant)

Dr. MOHAMED ABBAS

Name of the Participant Course/ Designation

Dr. Mohamed Abbas S : Head (R&D)

University/Institute

: Majestic Technologies Chennai

Email Id Phone No. : abbas432@gmail.com

:7299977711





FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: Integerated Manufacturing.

Date and Duration of Training: 28/11/22 to 4/12/22

Name of the Institute where Training has been conducted: BITS - Pilani

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.						Rati	ng				
No.	Content	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.										V
2.	Overall grading of the facilities provided by the institute, i.e., Hostel, Mess, Class Rooms, Transport/infrastructure etc.										V
3.	Overall grading of the faculty members conducting the training								discord.		V
4.	How do you rate the overall training methodology										L
5.	How far the field visit is relevant and related to your research study										L
6.	Usefulness of this training in your current role										V
7.	Usefulness of this training in future work/job you may handle										V
8.	How far have you benefitted from interaction with the fellow participants of the training										V
9.	How far the course material supplied relevant and related to the training curriculum										L
10.	Overall grading of the process of training										ı
11.	Your recommendation to your peers/ colleagues for the training Programme								40.5	Wersia	L

Any other suggestions/observations, if any-Good to be a poeut of this workshop-bontinue this way will enchance a good thoughts among people.

Rajeeth Kumor 2.

Name of the Participant Course/ Designation

University/Institute **Email Id**

Phone No.

: Mr. Rajeeth Kumar R

:Research Associate : VIT, Vellore

: rajeekumar264@gmail.com





FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: HIWH GND MACHINING CENTERS FOR COMPUTER

INTEGRATED MANUFACTURING

28/11/2022, Une-Week hand, 4/12/2012 Date and Duration of Training:

Name of the Institute where Training has been conducted: DePortment of mechanical engineering BITS pilani, pilani (a mpu)

Please rate the Programme components on a scale of 10 to 1 (10 indicates the programme)

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.						Rati	ng				
No.	Content	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.	MOUNT NOTE: THE PROPERTY OF TH			le san					en fi	~
2.	Overall grading of the facilities provided by the institute, i.e., Hostel, Mess, Class Rooms, Transport/infrastructure etc.										V
3.	Overall grading of the faculty members conducting the training			R.S. W.		48.83 S	30.025				V
4.	How do you rate the overall training methodology										V
5.	How far the field visit is relevant and related to your research study										V
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										1
9.	How far the course material supplied relevant and related to the training curriculum										V
10.	Overall grading of the process of training										
11.	Your recommendation to your peers/ colleagues for the training Programme										V

Any other suggestions/ observations, if any-

(Name of the Participant)

Name of the Participant Course/ Designation

University/Institute

Email Id Phone No. : Mr. Mukesh Kumar : Research Scholar

· NERIST Arunachal Pradesh.

. mk15880@gmail.com





FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: HIWH END MACHININUI GENTERS FOR COMPUTER INTEGRATED MFW.

Date and Duration of Training: 28-11-2022

PILANI CAMPUS Name of the Institute where Training has been conducted: BITS PILANI

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.						Rati	ng				
No.	Content	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		TO 100					11.02	S CONTRACT		V
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										2
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										h
9.	How far the course material supplied relevant and related to the training curriculum										V
10.	Overall grading of the process of training										V
11.	Your recommendation to your peers/ colleagues for the training Programme								9 2000		ν

Any other suggestions/ observations, if any-

(Name of the Participant)

(Ddwerdy

Dr. Maheshwar Derivedy

Name of the Participant Course/ Designation University/ Institute

Email Id Phone No. : Dr. Maheshwar Dwivedy

: Associate Professor

: BML Munjal Univesity, Haryana maheshwar.dwivedi@bmu.edu.in





FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: Onl-week hands on training workshop on the High and made in the grated "High and made in the grated "Aigh and Louring centres for computer integrated bate and Duration of Training: "28-11-2022 - 04-12-2022"

Name of the Institute where Training has been conducted: BITS Pilani, Pilani Campus, Rasastan.

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.						Rati	ng				
No.	Content	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.									V	
3.	Overall grading of the faculty members conducting the training		T S DAY S		36-05-740		Nations.	as mos		Short	V
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									1	
9.	How far the course material supplied relevant and related to the training curriculum									V	
10.	Overall grading of the process of training									/	
11.	Your recommendation to your peers/ colleagues for the training Programme						207			/	

Any other suggestions/ observations, if any-

(K. Viraya Bhasker Reddy) (Name of the Participant)

Name of the Participant Course/ Designation

University/Institute Email Id

Phone No.

: Mr. K. Vijaya Bhaskar Reddy

:Research Scholar : NIT Warangal

bhaskarsave.61@gmail.com





FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: One Week hands on training Worleshop on "High End Machining Centers for Computer Integrated Manufactury"

Date and Duration of Training: 28-11-2022 to 04-12-2022

Name of the Institute where Training has been conducted: BITS - Pilani.

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.						Rati	ng				
No.	Content	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.					idik si	2008/2				V
2.	Overall grading of the facilities provided by the institute, i.e., Hostel, Mess, Class Rooms, Transport/infrastructure etc.										V
3.	Overall grading of the faculty members conducting the training										V
4.	How do you rate the overall training methodology										V
5.	How far the field visit is relevant and related to your research study										
6.	Usefulness of this training in your current role										V
7.	Usefulness of this training in future work/job you may handle										1
8.	How far have you benefitted from interaction with the fellow participants of the training										L
9.	How far the course material supplied relevant and related to the training curriculum										1
10.	Overall grading of the process of training										1
11	Your recommendation to your peers/ colleagues for the training Programme					e leave					C

Any other suggestions/ observations, if any-

(Name of the Participant)

Name of the Participant Course/ Designation

University/Institute

Email Id Phone No.

: principal@sjcettnj.edu.in

9940869974

(Rof. Dr. D. Shanmiga sundaram)

: Dr. D. Shanmiga sundaram Principal & Prof in Mechanical Frys: Principal

: St. Joseph's College of Engineering and Technology, Tamil Nadu





FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: High End Machining centers for Computer Integrated manufactory

Date and Duration of Training: 29-11-22 to 4-12-22

Name of the Institute where Training has been conducted: BITS, Pilari Cambui

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.						Rati	ng				
No.	Content	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.								er gerege	V	1
2.	Overall grading of the facilities provided by the institute, i.e., Hostel, Mess, Class Rooms, Transport/infrastructure etc.										L
3.	Overall grading of the faculty members conducting the training				incarous	er en e	ant design			HEAR	-
4.	How do you rate the overall training methodology									~	1
5.	How far the field visit is relevant and related to your research study										V
6.	Usefulness of this training in your current role										
7.	Usefulness of this training in future work/job you may handle										1
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							~	1.		
10	. Overall grading of the process of training									~	1
11	Your recommendation to your peers/ colleagues for the training Programme				4000						

Very Good Program. Le EnJoyed Phani campus post one Weeks, Good Hospitality, kind People

(Name of the Participant)

Name of the Participant Course/ Designation

University/Institute

Email Id Phone No. : Dr. G. Tharanitharan

: Assistant Professor

: SNS College of Technology, Coimboture

tharanig.mech@snsct.org





FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme:

Date and Duration of Training:

Name of the Institute where Training has been conducted: BITS Pilani

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.						Rati	ng				
Vo.	Content	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				10.52240			#39 p	XX 4V to	NESOLS.	~
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									V	
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									1	2
11.	Your recommendation to your peers/ colleagues for the training Programme	l and			H BUSTO						V

Any other suggestions/ observations, if any-

(Name of the Participant)

Name of the Participant Course/ Designation

: Mr. Bhagmat Majhi : Dy. Manager

University/ Institute Email Id

: bhagmat.majhi@opg.co.in

Phone No.

7682854466

: OPGC, Odisha





FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: High end Machining Centrers for computer integrated Manufacturing.

Date and Duration of Training: 28/1/2022 to 4/12/2022.

Name of the Institute where Training has been conducted: BITS; pilani.

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.						Rati	ng				
No.	Content	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.	ist post					HIEAG			V	
2.	Overall grading of the facilities provided by the institute, i.e., Hostel, Mess, Class Rooms, Transport/infrastructure etc.									V	
3.	Overall grading of the faculty members conducting the training										V
4.	How do you rate the overall training methodology									V	
5.	How far the field visit is relevant and related to your research study									V	
6.	Usefulness of this training in your current role								V		
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									V	
10.	Overall grading of the process of training									~	
11.	Your recommendation to your peers/ colleagues for the training Programme								V		

Any other suggestions/ observations, if any-

Amit Kumar Maharana. (Name of the Participant)
(SPGC) 45/12/2022 -

Name of the Participant Course/ Designation

: Sr. Manager : OPGC, Odisha

University/ Institute **Email Id**

: amit.maharana@OPGC.co.in

: Mr. Amit Kumar Maharana

Phone No.





FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme:

DIT (STUTI)

Date and Duration of Training: 28/11/22 to 4/12/22 (7 days)

Name of the Institute where Training has been conducted: BITS, Pilam, Pikam Campul.

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

Any other suggestions/ observations, if any-

Parth Patretty A (Name of the Participant)

Name of the Participant Course/ Designation University/ Institute Email Id

Phone No.

: Mr. Parth Patpatiya: Assistant Professor: Banasthali Vidyapith

. parthpatpatiya@banasthali.in