

## FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: one week training program on R&D Equipments.

Date and Duration of Training: 15/04/23-21/04/23 → 1 week

Name of the Institute where Training has been conducted: Acharya Nagarjuna university  
College of Pharmaceutical Sciences.

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-

Practical sessions are good, but theory sessions are some what boring and not interesting. T. Chandra Sekhar.

(Name of the Participant)

**FEEDBACK FORM FOR TRAINING PROGRAM**

Title of the Training Programme: *A one week training program on R&D equipments*

Date and Duration of Training: *15/04/23 - 21/04/23 - 7 days*

Name of the Institute where Training has been conducted: *Archarya Nagarjuna University  
University college of pharmaceutical sciences,*

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-  
*workshop materials may be provided to participants for better understanding.*

(Name of the Participant)  
*NK. Sujetha*  
**NK. SUJETHA**





### FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: **SYNERGISTIC TRAINING PROGRAM UTILIZING THE SCIENTIFIC AND TECHNOLOGICAL INFRASTRUCTURE**  
 Date and Duration of Training: **15/04/23 to 21/04/23**  
 Name of the Institute where Training has been conducted: **ACHARYA NARAJUNA UNIVERSITY, GUNTUR.**

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)

*I. Baby Elizabeth.*



### FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: STUJS -20

Date and Duration of Training: 15.04.2023 - 21.04.2023

Name of the Institute where Training has been conducted: ANU (CCPS) Gundur, AP.

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-

S. Dhinesh Kumar  
8.4.2023  
(Name of the Participant)

**FEEDBACK FORM FOR TRAINING PROGRAM**

Title of the Training Programme: **STUTI**

Date and Duration of Training: **15-21 April 2023**

Name of the Institute where Training has been conducted: **ANU - Guntur (CPS)**

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-

**SEKAR HARIKRISHNAN**  
S. Hari Nij

(Name of the Participant)





### FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: *STUTI Hands on training on drug discovery & Formulation development - using HPLC Instrument/Equipments*

Date and Duration of Training: *15-04-2023 to 21-04-2023*

Name of the Institute where Training has been conducted: *University college of pharmaceuticals & sciences Acharya Nagarjuna University*

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-

*V. Rama Rao*  
(Name of the Participant)  
(VADAPALLI RAMA RAO)

### FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: *Drug discovery & formulation development*

Date and Duration of Training: *15<sup>th</sup> - 20<sup>th</sup> April 2023*

Name of the Institute where Training has been conducted: *university college of Pharmaceutical Sciences - Acharya nagarajuna university Guntur.*

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-

*Priyanka B*  
(Name of the Participant)

### FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: *Hands on Training on Drug discovery & Formulation development using RP-D instruments.*

Date and Duration of Training: *15/04/23 - 21/04/23 - 7 days*

Name of the Institute where Training has been conducted: *Acharya Nagarjuna University, Guntur college of pharmacy*

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-

*It could have been more useful if they utilized time for delivering talks than using it for their college self introduction. The some of the instruments mentioned in the brochure was not thought to us.*

(Name of the Participant)

*[Signature]*  
Shree lakshmi.T



**FEEDBACK FORM FOR TRAINING PROGRAM**

Title of the Training Programme: *Hands on training on Drug discovery & formulation Development using R&D instruments / equipment*

Date and Duration of Training: *15-21 April [1 week]*

Name of the Institute where Training has been conducted: *Acharya Nagarjuna University, Guntur. College of pharmaceutical Sciences.*

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-

*you might have conducted more topics based on chemistry.*

*Nayashree. B A*  
 (Name of the Participant)  
*Nayashree. B A*

### FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: A ONE WEEK TRAINING PROGRAM ON R&D EQUIPMENTS

Date and Duration of Training: 15/04/23 - 21/04/23 - 7days

Name of the Institute where Training has been conducted: Acharya Nagarjuna University  
University College of Pharmaceutical Sciences

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-

workshop manuals may be provided to participants for better understanding

(Name of the Participant)

M. Kavinitaru

(KAVINITARU.M)





### FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: *STUTI-2021*

Date and Duration of Training: *15th - 21st April 2023*

Name of the Institute where Training has been conducted: *ANU CPS, ANU, Guntur, AP*

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-

*Rahul Sahas*

(Name of the Participant)

*Rahul Sahas*

### FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: STUTI

Date and Duration of Training: 15-04-2023 — 21-04-2023 (7 days)

Name of the Institute where Training has been conducted: ANUCPS, Guntur.

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: The molecular docking parts should be done in the form of software, it would have been better for the students.

S. Shyamala  
Dr Shyamala Shrik  
(Name of the Participant)

**FEEDBACK FORM FOR TRAINING PROGRAM**

Title of the Training Programme: Synergistic Training Program Utilizing the scientific and Technological Infrastructure STOTT-2021  
 Date and Duration of Training: 15-21 April 2023

Name of the Institute where Training has been conducted: Acharya Nagarjuna University, College of Pharmacy, Guntur

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-

Kindly provide study material if possible in the beginning.



(Name of the Participant)

CHETAN. A



### FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: Synergistic Training Program utilizing the scientific and Technological infrastructure (STUTI-2021)

Date and Duration of Training: 15-21 April 2023

Name of the Institute where Training has been conducted: Acharya Nagarjuna University, Guntur.  
College of Pharmaceutical sciences.

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- No more suggestions

(Name of the Participant)

Bhavya.P.

### FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: *Synergistic Training Program utilizing the scientific and*

Date and Duration of Training: *Technological infrastructure STUTI-2021*

*15-21 April 2023*

Name of the Institute where Training has been conducted: *Acharya Nagarjuna university, Guntur*  
*college of pharmaceutical sciences*

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-

*Anjitha pv*

(Name of the Participant)

**FEEDBACK FORM FOR TRAINING PROGRAM**

Title of the Training Programme: *Synergistic Training Program Utilizing the Scientific and Technological Infrastructure (STUTI - 2021)*

Date and Duration of Training: *15th - 21st April 2023 / 1 week*

Name of the Institute where Training has been conducted: *University College of Pharmaceutical Sciences, Acharya Nagarajuna University, Guntur*


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-

*Kindly Conduct short term training programs in future as well. Thank you for such an informative Sessions*

*Dr. P. Raveesha*  
(Name of the Participant)






**FEEDBACK FORM FOR TRAINING PROGRAM**

Title of the Training Programme: *STUTI (One week training Programme on R&D Equipment)*  
 Date and Duration of Training: *1 week (15/4/2023 to 21/4/2023)*  
 Name of the Institute where Training has been conducted: *University college of pharmaceutical Science, Acharya, Nagarjuna University*

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)  
*(K. Parimala)*  
 Asst. Professor  
 V.V.I.P.S

### FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: *Hands on training on Drug delivery & Formulation development using R & D instrument.*

Date and Duration of Training: *15-04-2023 to 21/04-2023 → 7 days*

Name of the Institute where Training has been conducted: *Acharya Nagarjuna University, <sup>pharmaceutical Sci</sup> Guntur*

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-

*Could have been more specific with the topic and correct hands on experience instead of just watching*

(Name of the Participant)

*Kannika*

**FEEDBACK FORM FOR TRAINING PROGRAM**

Title of the Training Programme: *STOTI - programme*

Date and Duration of Training: *15/4/2023 - 21/4/2023*

Name of the Institute where Training has been conducted: *ANUPA*

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-

*Overall good.*

*K. Jyothi*

*[Signature]*

(Name of the Participant)



### FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: *STUTI - Programme.*

Date and Duration of Training: *15/4/2023 - 21/4/2023*

Name of the Institute where Training has been conducted: *ANUCPS*

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-

*Everything good*

*S/c Jareena*  
*S/c Jareena*

(Name of the Participant)

### FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: *synergistic training program utilizing the scientific and technological infrastructure.*

Date and Duration of Training: *15-4-2023 to 21-4-2023*

Name of the Institute where Training has been conducted: *Acharya Nagarjuna University (ANU) National Institute of Technology, Warangal*

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- *No*

K. LURDHU MARY.  
(Name of the Participant)

*K. L. Mary*





### FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: Hands on Training on Drug Discovery, Formulation Development using R&D instruments/equipment

Date and Duration of Training: 15-21<sup>st</sup> April-2023 7 days

Name of the Institute where Training has been conducted: Acharya Neelganga University, College of Pharmaceutical Sciences. (ANU-CPS)

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-

N. Girish  
(Name of the Participant)

NARLA GIRISH

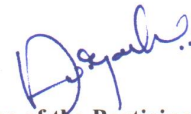
**FEEDBACK FORM FOR TRAINING PROGRAM**

Title of the Training Programme: Synergistic training (STUTI) – R&D Equipment  
 Date and Duration of Training: 15 - 21 April 2023  
 Name of the Institute where Training has been conducted: ANUCPS, GUNTUR

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)  
T. Arinash Reddy

### FEEDBACK FORM FOR TRAINING PROGRAM

Title of the Training Programme: *hands on training on drug discovery & formulation develop using R&D instruments*

Date and Duration of Training: *15-21 April - 2023 - 7 days*

Name of the Institute where Training has been conducted: *Acharyanagar jura university college of pharmacy*

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-

*M. S. Dhandapani*  
(Name of the Participant)

*M. S. Dhandapani*





