	on No (provided by ATAB): 2-012/2024	:	Date of Application: 07-10-2024			
Name and Provider: aman	Location of the Training	Name of the course to be assessed: A.I/UX ,				
Way of as onsite	sessment (onsite/ hybrid/ vi	rtual): No of Mandays:				
Signature:						
Assessor I	Name	Shubhai	m Singh(Lead	Assessor)		
Team Leader:	Shubham Singh (Lead Assessor)	Rep. As	sessee Orgn: test			
Brief abou	at the Opening Meeting: N/A	A				
Sl. No	Objective Element	NC raised	CAPA by Training Provider	Document submitted against the NC	Remarks (Accepted/ Not accepted)	
Course Na	nme: A.I/UX					
VMO.1	The institution shall have a clearly defined and documented mission and vision.	NC1		NC1	sdsdffsdf	
VMO.2	The institution shall have defined objectives and measure them periodically	NC1		NC1	sdfgdf fdgd	
VMO.3	The institution shall have mentioned activities that are taken to achieve these objectives.	NC1		NC1	fdxgdsdf	
Brief Sum	mary: this is the summary	1	1	ı		

Date: 30-09-2024 Signature:

OPPORTUNITY FOR IMPROVEMENT FORM					
Name and Location of	the Training Provider: aman	Name of the course to be assessed: A.I/UX			
Way of assessment (onsite/ hybrid/ virtual): onsite			No of Mandays: 2		
S.No.	Opportunity for improvement Form	Standard reference			
1	test	test			
Signatures					
Assessor Name	Shubham Singh (Lead Assessor)				
Team Leader	Shubham Singh (Lead Assessor)	Rep. As	ssessee Orgn : test		
Date: 07-10-2024 Signature of the Team Leade					