



## GLOBAL INITIATIVE OF ACADEMIC NETWORK

### PARTICIPANTS FEEDBACK FORM Workshop on Communication Innovation & Entrepreneurship

Your feedback is critical for the GIAN team to ensure we are meeting your educational needs. Please complete the following feedback form.

Course Title: \_\_\_\_\_ Course Dates: \_\_\_\_\_

Host Institute Name: \_\_\_\_\_

Participant Name: \_\_\_\_\_

Category: UR ☐ SC ☐ ST ☐ OBC ☐ EWS ☐

Participant Email Address: \_\_\_\_\_ Participant Phone Number: \_\_\_\_\_

Please rate the following: Excellent (5) Very Good (4) Good (3) Satisfactory (2) Poor (1)

Particulars	Score
Course Instructors:	_____
Course Content:	_____
Tutorials/Discussions/Hands-on Sessions:	_____
Acoustics and Other Facilities:	_____

#### Overall Experience with the GIAN program:

Excellent (5) Very Good (4) Good (3) Satisfactory (2) Poor (1)

#### Comments on this Workshop on Communication Innovation & Entrepreneurship:

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Signature: \_\_\_\_\_

Thank you for your valuable feedback!