Participant Feedback Form

Program Title	JPA and Hybernate			
Participant Name		Company	SLK Software Services Pvt Ltd	
Trainer Name	Upasana	Location	Bangalore	
Training Date(s)	From	14TH Oct, 2019	To 25th Oct,19	

S. No	Parameter	5 (High)	4	3	2	1 (Low)
1.	How well were the program objectives explained at the start?					
2.	How effective was the Trainer in clearly communicating the concepts and handling doubts?					
3.	How would you rate the Trainer's ability to ensure participation from the class?					
4.	How effectively Exercises/ assignments etc. used?					
5.	How effective was the Trainer in sharing examples on the concepts?					
6.	Based on the coverage, how confident are you that you can apply/practice what you have learnt in this program, in your job?					

- What were the major learning points for you?

- With reference to your learning, what is your personal action plan?

- Any other comments / Suggestions:

Participant Signature