10/10/2019 Feedback form



Training Feedback Form - Trainee VSPL/FM/25, V1.0

Name of the Training	CMMI Introduction Training						
Duration, Date, Venue	1 hr, 2019-10-10, seminar hall						
Faculty / Faculties	roshan						
Course objective	Learning						
Rating:(Please [/] the a column)	ppropriate	Excellent	Very Good	Good	Fair	Poor	
How do you rate:		A	В	C	D	E	
Faculty's knowledge of the topic?						✓	
Communication skill of the faculty?						✓	
Commitment of the faculty	?					✓	
General view of the training	g					√	
Specify the weakness of the (Faculty/ quality of training timeliness of the program/ arrangements), if any.							
Specify the strength of the course (Faculty/ quality of training material/ timeliness of the program/ arrangements), if any.		fghfghg					
If any addition is required current topics to increase the course:		fgfgh					
If any deletion is required current topics to increase the course:		fghfgh					
How well has the course mobjectives?	et the	fghfghfg					

Akhil Aloscoius

Page 1 of 1 **Vofox Controlled**

10/10/2019 Feedback form



Training Feedback Form - Trainee

VSPL/FM/25, V1.0

Name of the Training	CMMI Introduction Training					
Duration, Date, Venue	1 hr, 2019-10-10, seminar hall					
Faculty / Faculties	roshan					
Course objective Learning C Rating:(Please [/] the appropriate column)			Very Good	Good	Fair	Poor
How do you rate:		A	В	C	D	E
Duration, Date, Venue 1 hr, 201 Faculty / Faculties roshan Course objective Learning Rating: (Please [✓] the appropriate column)						√
Communication skill of the	e faculty?	✓				
Commitment of the faculty?		✓				
General view of the training	g	✓				
(Faculty/ quality of training timeliness of the program/ arrangements), if any. Specify the strength of the (Faculty/ quality of training timeliness of the program/	g material/					
current topics to increase the						
-						
How well has the course mobjectives?	net the					

Priyanka

Vofox Controlled Page 1 of 1

10/10/2019 Feedback form

VSPL/FM/25, V1.0



Training Feedback Form - Trainee

Name of the Training	CMMI Introduction Training						
Duration, Date, Venue		1 hr, 2019-10-10, seminar hall					
Faculty / Faculties	roshan						
Course objective	Learning CMMI						
Rating:(Please [/] the a column)	ppropriate	Excellent	Very Good	Good	Fair	Poor	
How do you rate:		A	В	C	D	E	
Faculty's knowledge of the	topic?				√		
Communication skill of the	e faculty?				√		
Commitment of the faculty	?				√		
General view of the trainin	g				√		
Specify the weakness of the (Faculty/ quality of training timeliness of the program/ arrangements), if any. Specify the strength of the (Faculty/ quality of training timeliness of the program/	g material/						
If any addition is required current topics to increase the course:							
If any deletion is required current topics to increase the course:							
How well has the course mobjectives?	et the						

Ajanth R

Vofox Controlled Page 1 of 1

10/10/2019 Feedback form

VSPL/FM/25, V1.0



Training Feedback Form - Trainee

Name of the Training	CMMI Introduction Training						
Duration, Date, Venue	1 hr, 2019-10-10, seminar hall						
Faculty / Faculties	roshan						
Course objective	Learning CMMI						
Rating:(Please [/] the appropriate column)		Excellent	Very Good	Good	Fair	Poor	
How do you rate:		A	В	С	D	E	
Faculty's knowledge of the	topic?				✓		
Communication skill of the	e faculty?				✓		
Commitment of the faculty	?				✓		
General view of the training	g				✓		
timeliness of the program/ arrangements), if any. Specify the strength of the (Faculty/ quality of training timeliness of the program/ arrangements), if any.							
If any addition is required current topics to increase the course:							
If any deletion is required current topics to increase the course:							
How well has the course m objectives?	et the						

Abhijith A

Vofox Controlled Page 1 of 1