



SSM INSTITUTE OF ENGINEERING AND TECHNOLOGY

Dindigul- Palani Highway, Dindigul – 624 002

Department of Mechanical Engineering

Event Name: Workshop on Project Expo

Date: 13.09.19

Venue : New Seminar Hall

S.NO	REG NO	NAME	
1	922116114006	AMAR JOTHI B	Amarjothi. B.
2	922116114011	CHINNA SAMY O	Chinna Samy O
3	922116114015	GOKUL M	Gokul M
4	922116114022	HARI VIGNESH G	Hari Vignesh G
5	922116114028	JOTHIMURUGAN K	Jothimurugan K
6	922116114034	KARUNAKARAN R	Karunakaran R
7	922116114036	KAVIARASU K	Kaviarasu K
8	922116114044	MUTHU ARUN KUMAR A	Muthu Arun Kumar A
9	922116114049	NAVEEN KUMAR P	Naveen Kumar P
10	922116114054	PONSANKAR T	Ponsankar T
11	922116114058	RAJASEKARAN S	Rajasekaran S
12	922116114062	RAM KUMAR K	Ram Kumar K
13	922116114065	ROHAN.K	Rohan.K
14	922116114073	SATHYA.S	Sathya.S
15	922116114069	SANTHOSH ROBINSON.A	Santhosh Robinson.A
16	922116114080	THARUN.S	Tharun.S
17	922116114084	VENKATESH KUMAR.P	Venkatesh Kumar.P
18	922116114088	VINOTH KUMAR.M	Vinoth Kumar.M
19	922116114309	KULASHEKARAN R	Kulashekaran R
20	922116114319	RAMESH KANNAN T	Ramesh Kannan T
21	922117114008	ARUN KUMAR M	Arun Kumar M
22	922117114019	DEEPAKRAJ T	Deepakraj T
23	922117114028	GAJENDREN R	Gajendren R
24	922117114041	JAYAPRATHAP N	Jayaprathap N
25	922117114045	KAMAL K	Kamal K
26	922117114051	KAVIN RAJ K	Kavin raj.k.
27	922117114066	NAGARAJ A	Nagaraj A
28	922117114081	PERIYASAMY K	Periyasamy K
28	922117114089	RAJGANGA A	Rajganga A
29	922117114095	SANTHOSE KUMAR R	Santhose Kumar R
30	922117114303	JENNISON J	Jennison J
31	922117114310	SRI SUDHARSANA SAKRAVARTHI	Sri Sudharsana Sakravarthi
32	922118114006	AKASH A	Akash A
33	922118114010	DINESH S	Dinesh S
34	922118114026	LOGESH D	Logesh D
35	922118114036	MOHANLAL S	Mohanlal S
36	922118114043	OM PRAKASH M	Om Prakash M
37	922118114054	SAFEER RAJA J	Safeer Raja J
38	922118114059	SANTHOSH R	Santhosh R
39	922118114066	SHIFAATH A	Shifaath A
40	922118114072	SRINIVAAS S	Srinivaas S
41	922118114304	HARISH	Harish
42	922118114311	PRASANTH J	Prasanth J

L.S. →
HOD/MECH.

Event-Coordinator

HoD / MECH



SSM INSTITUTE OF ENGINEERING AND TECHNOLOGY

Dindigul- Palani Highway, Dindigul – 624 002.

Department of Mechanical Engineering

Name of the Student : ROHAN.K (Optional)

Event Title : workshop on project Expo

Date : 13/09/2019

Please respond to the following questions by ticking one box only for each question. if you have any criticism or suggestions for improvement. Your views are very important and will help us to improve our events, facilities, etc.

Section 1 – Event

Scoring Example

5	4	3	2	1
---	---	---	---	---

1. Information provided at this event is relevant to you

High	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LOW
------	-------------------------------------	--------------------------	--------------------------	--------------------------	--------------------------	-----

2. You are likely to use this information in the future

High	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LOW
------	--------------------------	-------------------------------------	--------------------------	--------------------------	--------------------------	-----

3. Presentations were interesting

High	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LOW
------	-------------------------------------	--------------------------	--------------------------	--------------------------	--------------------------	-----

4. You would recommend this event to others

High	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LOW
------	-------------------------------------	--------------------------	--------------------------	--------------------------	--------------------------	-----

5. Overall, the event was worthwhile

High	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LOW
------	--------------------------	-------------------------------------	--------------------------	--------------------------	--------------------------	-----

6. The venue was suitable

High	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LOW
------	-------------------------------------	--------------------------	--------------------------	--------------------------	--------------------------	-----

7. Comments/ suggestions (If any)

<u>✓</u>

ROHAN.K
Signature



SSM INSTITUTE OF ENGINEERING AND TECHNOLOGY

Dindigul- Palani Highway, Dindigul – 624 002.

Department of Mechanical Engineering

Name of the Student : THARUN.S (Optional)

Event Title : workshop on project Expo

Date : 13-09-2019

Please respond to the following questions by ticking one box only for each question. if you have any criticism or suggestions for improvement. Your views are very important and will help us to improve our events, facilities, etc.

Section 1 – Event

Scoring Example

5	4	3	2	1
---	---	---	---	---

1. Information provided at this event is relevant to you

High	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LOW
------	-------------------------------------	--------------------------	--------------------------	--------------------------	--------------------------	-----

2. You are likely to use this information in the future

High	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LOW
------	-------------------------------------	--------------------------	--------------------------	--------------------------	--------------------------	-----

3. Presentations were interesting

High	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LOW
------	-------------------------------------	--------------------------	--------------------------	--------------------------	--------------------------	-----

4. You would recommend this event to others

High	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LOW
------	-------------------------------------	--------------------------	--------------------------	--------------------------	--------------------------	-----

5. Overall, the event was worthwhile

High	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LOW
------	-------------------------------------	--------------------------	--------------------------	--------------------------	--------------------------	-----

6. The venue was suitable

High	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LOW
------	-------------------------------------	--------------------------	--------------------------	--------------------------	--------------------------	-----

7. Comments/ suggestions (If any)

Tharun.S
Signature

A. Muraji
Signature


Signature



SSM INSTITUTE OF ENGINEERING AND TECHNOLOGY

Dindigul- Palani Highway, Dindigul – 624 002.

Department of Mechanical Engineering

Name of the Student : Prasanth J (Optional)

Event Title : work of project explore

Date : 13.09.2019

Please respond to the following questions by ticking one box only for each question. if you have any criticism or suggestions for improvement. Your views are very important and will help us to improve our events, facilities, etc.

Section 1 – Event

Scoring Example

5	4	3	2	1
---	---	---	---	---

1. Information provided at this event is relevant to you

High	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LOW
------	-------------------------------------	--------------------------	--------------------------	--------------------------	--------------------------	-----

2. You are likely to use this information in the future

High	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LOW
------	-------------------------------------	--------------------------	--------------------------	--------------------------	--------------------------	-----

3. Presentations were interesting

High	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LOW
------	-------------------------------------	--------------------------	--------------------------	--------------------------	--------------------------	-----

4. You would recommend this event to others

High	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LOW
------	-------------------------------------	--------------------------	--------------------------	--------------------------	--------------------------	-----

5. Overall, the event was worthwhile

High	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LOW
------	-------------------------------------	--------------------------	--------------------------	--------------------------	--------------------------	-----

6. The venue was suitable

High	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LOW
------	-------------------------------------	--------------------------	--------------------------	--------------------------	--------------------------	-----

7. Comments/ suggestions (If any)

<p><u>+</u></p>

Prasanth J
Signature