In our Quest for Excellence your Feedback is very critical. (Please fill the form completely)



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Name of Trainer:	Training Module:				
1. Name					
2. Email Id					
3. Contact No					
4. Your Job Role					
5. Please rate the overall Quality of	Content of the event				
Γ	Bad 1	Average 2	Good 3	Very Good 4	Excellent 5
i. Quality of Demos ii. Presentation skills of Trainer					
iii. Query solving by Trainer iv. Overall quality of Program					
Any other Technology that you a Your Comments:					
Thank you, we appreciate your feedback!				Signature:	