



Comments on the planning, management and relevance of the programme

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Name of the Participants: : \_\_\_\_\_  
Designation: : \_\_\_\_\_  
Qualification: : \_\_\_\_\_  
Contact Details: : Tel (O) STD Code \_\_\_\_\_ Tel \_\_\_\_\_  
Tel (R) STD Code \_\_\_\_\_ Tel \_\_\_\_\_  
  
Mobile: \_\_\_\_\_  
E.Mail: \_\_\_\_\_

Name of the Institution of the Participant: : \_\_\_\_\_  
  
Address: : \_\_\_\_\_  
: \_\_\_\_\_pincode:

(Signature of Participant)