

FEEDBACK REPORT of TRAINING

1	Name of School	
2	Designation	
3	Name of the Official	
4	Date of Retirement	
5	Venue & Duration of the Training Programme	
6	Do you feel any change after completion of the Training Programme	
7	Planning in order of priority to implement the learning in the classroom teaching/ Administration/ Other official assignment	
8	What is your specific experience about this Training	
9	Any suggestion on your part to bring out improvement in Education	

Signature of the Official

Counter signature of Head with observation, if any. _____
