

Training Feedback Form - PMKVY

Trainee Name:		Training Center Name:	
Job Role Enrolled:		Center Id :	
Training Start Date:		Batch id :	
Trainer's name:		Student Enrolment No :	

A) About Trainer and Training (Kindly tick one option)

Particulars	Strongly Agree	Agree	Disagree	Strongly Disagree
The Trainer is Knowledgeable				
Adequate time is provided for questions & discussion, and clearing doubts				
The topics mentioned in the Course outline are taught in the class				
The trainer demonstrates the use of Tools & Equipment to conduct the training (if applicable)				
Classes are conducted regularly and on time				

B) About The Training Venue (Kindly tick one option)

Particulars	Excellent	Good	Average	Poor
The Center and Labs/ Workshop is hygienic and safe				
The workshop/ Lab is good in terms of space, lighting and seating arrangement				

C) Awareness on PMKVY (Kindly tick one option)

Particulars	Yes	No
Were you briefed about PMKVY in the beginning of the course		
Have you watched the PMKVY Animation Video		
Have you been provided the PMKVY booklet/ Pamphlet at the beginning of the course		
Are you aware of the Training Course fee being charged		
Are you aware of the Assessment Fee that is being charged		
Are you aware of the Reward money you will receive after successful completion of course		
Are you aware of the Auto Debit Mandate		
Are you aware of the PMKVY Grievance Portal		
How did you first come to know about PMKVY		

D) (Kindly tick one option)

	Excellent	Good	Average	Poor
How would you rate the training overall				

Trainee's Signature.....

Date