#### **FEEDBACK FORM**

NAME OF ACTIVITY - FIELD VISIT/ PROJECT/ INTERNSHIP/ - 018	age Home	1015.
NAME OF ACTIVITY - FIELD VISIT/ PROJECT/ INTERNSHIP/	3180 11.1.	
NAME OF STUDENTS:- Laxini Rajkumar Ponane		
CLASS WITH SECTION R. A. TILLY DE UN		
DATE OF PROGRAMME/ ACTIVITY: - 20-08- 20-29		
DEPARTMENT 124 SOCIOSY		
MOBILE NO:- 458863 4025		

- 1) How did you feel about this event?
- Excellent b) Very good c) Good d) Average
  - 2) The talk/ activity was relevant with the topic?
  - a) Strongly Agree b) Agree c) Neutral d) Disagree
  - 3) Was this program/ Activity beneficial to you?
  - a) Yes b) No c) Maybe
  - 4) Should such events be re- organized?
  - a) Yes b) No c) Maybe



L.R. POYCINE SIGNATURE

#### **FEEDBACK FORM**

		age Home	Visit
NAME OF STUDENTS: - 5 hital Shankor Masurko	98		
CLASS WITH SECTION B.A. I Year			
DATE OF PROGRAMME/ ACTIVITY: 70-08-7074			
DEPARTMENT SOCIOLOGY	378		
MOBILE NO:- 9637212458			

1)	How did you feel about this event?						
a)	Excellent	b) Very good	c) Good	d) Avera	ge		
2)	?) The talk/ activity was relevant with the topic?						
a)	Strongly A	gree b) Ag	ree c) Neu	tral	d) Disagree		
3)	3) Was this program/ Activity beneficial to you?						
a)	Yes	b) No	c) Maybe				
	V						
4)	) Should such events be re- organized?						
a)	Yes	b) No	c) Maybe				
,	V	·					



5) Suggestion if any.................

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#### **FEEDBACK FORM**

NAME OF ACTIVITY - FIELD VISIT/ PROJECT/ INTERNSHIP/ - 018 age Home Visit NAME OF STUDENTS:- Mayuri Burendra Mandwakar CLASS WITH SECTION B. A. III th year DATE OF PROGRAMME/ ACTIVITY:- \_ 70-08-2024 DEPARTMENT Ard Sociology MOBILE NO:- 8767946 147

1) How did yo	) How did you feel about this event?					
a Excellent	b) Very good	c) Good	d) Average			

- 2) The talk/ activity was relevant with the topic?
- a) Strongly Agree b) Agree c) Neutral d) Disagree
- 3) Was this program/ Activity beneficial to you?
- a Yes b) No c) Maybe
- 4) Should such events be re- organized?
- (a) Yes b) No c) Maybe
- 5) Suggestion if any...........



N.S.Mandruk SIGNATURE

#### **FEEDBACK FORM**

NAME OF ACTIVITY - FIELD VISIT/ PROJECT/ INTERNSHIP/ - 018 CLASS HOME VISITION - B.A. II YEAR DATE OF PROGRAMME/ ACTIVITY: - 20-08-2024 DEPARTMENT
1) How did you feel about this event?
a) Excellent \b) Very good c) Good d) Average
2) The talk/ activity was relevant with the topic?
a) Strongly Agree (b) Agree c) Neutral d) Disagree
3) Was this program/ Activity beneficial to you?
Yes b) No c) Maybe
4) Should such events be re- organized?
Yes b) No c) Maybe
5) Suggestion if any



& Shende SIGNATURE

#### **FEEDBACK FORM**

7,734.5	
NAME OF ACTIVITY - FIELD VISIT/ PROJECT/ INTERNSHIP/ - 012 age Home Visit NAME OF STUDENTS: - Structural Gayway Refumbeur CLASS WITH SECTION - B.A. II Year DATE OF PROGRAMME/ ACTIVITY: - 20-08-2024 DEPARTMENT	N
1) How did you feel about this event?	
Excellent b) Very good c) Good d) Average	
2) The talk/ activity was relevant with the topic?	
(a) Strongly Agree b) Agree c) Neutral d) Disagree	
3) Was this program/ Activity beneficial to you?	
a) Yes b) No c) Maybe	
4) Should such events be re- organized?	
a) Ves Ve) No c) Maybe	



5) Suggestion if any.....\\d\d

SIGNATURE