

# Training Feedback



PAX NAME:	SOHINI DE	EMP CODE:				
SUBJECT/CLIENT:	MS Excel/Singhanian & Sons Pvt. Ltd.	Email:	sohini.de@singhanian-group.com			
FACILITATOR NAME	Rashid Rizwi	MOB:	8334801571			
		DATE:	28 <sup>th</sup> June to 1 <sup>st</sup> July 2022			
PROGRAM EFFECTIVENESS	1	2	3	4	5	Specific points for action, if any
	Low				High	

To what extent has your understanding of the subject improved as a result of the program?      5

To what extent has the program been useful for you?      5

To what extent has the program been relevant for your role?      5

Will you recommend this program to your colleague/friends?      5

Facilitator	1	2	3	4	5	Specific points for action, if any
FACILITATOR EFFECTIVENESS	Low				High	
Knowledge of the subject / topics covered	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> 5	
Style and delivery	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> 5	
Responsiveness to the group	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> 5	
Motivational approach towards the participants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> 5	
Ability to engage / involve participants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> 5	

Really very happy & satisfied. Thanks a lot.

# Training Feedback



PAX NAME:	Robindra K. Jaiswal					EMP CODE:	
SUBJECT/CLIENT:	MS Excel/Singhania & Sons Pvt. Ltd.					Email:	jaiswalrobindra@yahoo.co.in
FACILITATOR NAME	Rashid Rizwi					MOB:	9903160706
						DATE:	28 <sup>th</sup> June to 1 <sup>st</sup> July 2022
PROGRAM EFFECTIVENESS	1	2	3	4	5	Specific points for action, if any	
	Low				High		

To what extent has your understanding of the subject improved as a result of the program?

To what extent has the program been useful for you?

To what extent has the program been relevant for your role?

Will you recommend this program to your colleague/friends?

Facilitator	1	2	3	4	5	Specific points for action, if any
FACILITATOR EFFECTIVENESS	Low				High	
Knowledge of the subject / topics covered	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Style and delivery	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Responsiveness to the group	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Motivational approach towards the participants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Ability to engage / involve participants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	



# Training Feedback



PAX NAME:	SANTOSH KL. JHA				EMP CODE:	10101
SUBJECT/CLIENT:	MS Excel/Singhania & Sons Pvt. Ltd.				Email:	Santoshjha77@gmail.com
FACILITATOR NAME	Rashid Rizwi				MOB:	9831076749
					DATE:	28 <sup>th</sup> June to 1 <sup>st</sup> July 2022
PROGRAM EFFECTIVENESS	1	2	3	4	5	Specific points for action, if any
	Low				High	

To what extent has your understanding of the subject improved as a result of the program?

To what extent has the program been useful for you?

To what extent has the program been relevant for your role?

Will you recommend this program to your colleague/friends?

Facilitator	1	2	3	4	5	Specific points for action, if any
FACILITATOR EFFECTIVENESS	Low				High	

Knowledge of the subject / topics covered

Style and delivery

Responsiveness to the group

Motivational approach towards the participants

Ability to engage / involve participants



# Training Feedback



PAX NAME:	NIPA DUTTA	EMP CODE:				
SUBJECT/CLIENT:	MS Excel/Singhania & Sons Pvt. Ltd.	Email:	nipanipa.saha@gmail.com			
FACILITATOR NAME	Rashid Rizwi	MOB:	9903216681			
		DATE:	28 <sup>th</sup> June to 1 <sup>st</sup> July 2022			
PROGRAM EFFECTIVENESS	1	2	3	4	5	Specific points for action, if any
	Low				High	

To what extent has your understanding of the subject improved as a result of the program?

To what extent has the program been useful for you?

To what extent has the program been relevant for your role?

Will you recommend this program to your colleague/friends?

Facilitator	1	2	3	4	5	Specific points for action, if any
FACILITATOR EFFECTIVENESS	Low				High	

Knowledge of the subject / topics covered

Style and delivery

Responsiveness to the group

Motivational approach towards the participants

Ability to engage / involve participants



# Training Feedback



PAX NAME:	Balaka Chatterjee					EMP CODE:	
SUBJECT/CLIENT:	MS Excel/Singhania & Sons Pvt. Ltd.					Email:	
FACILITATOR NAME	Rashid Rizwi					MOB:	9831097732
						DATE:	28 <sup>th</sup> June to 1 <sup>st</sup> July 2022
PROGRAM EFFECTIVENESS	1	2	3	4	5	Specific points for action, if any	
	Low				High		

To what extent has your understanding of the subject improved as a result of the program?

To what extent has the program been useful for you?

To what extent has the program been relevant for your role?

Will you recommend this program to your colleague/friends?

Facilitator	1	2	3	4	5	Specific points for action, if any
FACILITATOR EFFECTIVENESS	Low				High	

Knowledge of the subject / topics covered

Style and delivery

Responsiveness to the group

Motivational approach towards the participants

Ability to engage / involve participants

# Training Feedback



PAX NAME:	<i>Ms. Laxmi Chakrabarty</i>	EMP CODE:				
SUBJECT/CLIENT:	MS Excel/Singhania & Sons Pvt. Ltd.	Email:				
FACILITATOR NAME	Rashid Rizwi	MOB:	<i>9903755088</i>			
		DATE:	<i>28<sup>th</sup> June to 1<sup>st</sup> July 2022</i>			
PROGRAM EFFECTIVENESS	1	2	3	4	5	Specific points for action, if any
	Low			High		

To what extent has your understanding of the subject improved as a result of the program?

To what extent has the program been useful for you?

To what extent has the program been relevant for your role?

Will you recommend this program to your colleague/friends?

Facilitator	1	2	3	4	5	Specific points for action, if any
FACILITATOR EFFECTIVENESS	Low			High		
Knowledge of the subject / topics covered	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Style and delivery	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Responsiveness to the group	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Motivational approach towards the participants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Ability to engage / involve participants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	



# Training Feedback



PAX NAME:	Soumen Banerjee	EMP CODE:	N/A			
SUBJECT/CLIENT:	MS Excel/Singhania & Sons Pvt. Ltd.	Email:				
FACILITATOR NAME	Rashid Rizwi	MOB:	98308 96124			
		DATE:	28 <sup>th</sup> June to 1 <sup>st</sup> July 2022			
PROGRAM EFFECTIVENESS	1	2	3	4	5	Specific points for action, if any
	Low			High		

To what extent has your understanding of the subject improved as a result of the program?

To what extent has the program been useful for you?

To what extent has the program been relevant for your role?

Will you recommend this program to your colleague/friends?

Facilitator	1	2	3	4	5	Specific points for action, if any
FACILITATOR EFFECTIVENESS	Low			High		

Knowledge of the subject / topics covered

Style and delivery

Responsiveness to the group

Motivational approach towards the participants

Ability to engage / involve participants

# Training Feedback



PAX NAME:	NUSRAT NAAZ	EMP CODE:				
SUBJECT/CLIENT:	MS Excel/Singhania & Sons Pvt. Ltd.	Email:	nusrat@bouji.in			
FACILITATOR NAME	Rashid Rizwi	MOB:				
		DATE:	28 <sup>th</sup> June to 1 <sup>st</sup> July 2022			
PROGRAM EFFECTIVENESS	1	2	3	4	5	Specific points for action, if any
	Low				High	

To what extent has your understanding of the subject improved as a result of the program?      until I practice regularly

To what extent has the program been useful for you?

To what extent has the program been relevant for your role?

Will you recommend this program to your colleague/friends?

Facilitator	1	2	3	4	5	Specific points for action, if any
FACILITATOR EFFECTIVENESS	Low				High	
Knowledge of the subject / topics covered	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Style and delivery	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Responsiveness to the group	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Motivational approach towards the participants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Ability to engage / involve participants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	



# Training Feedback



PAX NAME:	<i>Ankita Choudhury</i>	EMP CODE:				
SUBJECT/CLIENT:	MS Excel/Singhania & Sons Pvt. Ltd.	Email:	<i>ankitachoudhury67@gmail.com</i>			
FACILITATOR NAME	Rashid Rizwi	MOB:	<i>7980502052</i>			
		DATE:	<i>28<sup>th</sup> June to 1<sup>st</sup> July 2022</i>			
PROGRAM EFFECTIVENESS	1	2	3	4	5	Specific points for action, if any
	Low			High		

To what extent has your understanding of the subject improved as a result of the program?

To what extent has the program been useful for you?

To what extent has the program been relevant for your role?

Will you recommend this program to your colleague/friends?

Facilitator	1	2	3	4	5	Specific points for action, if any
FACILITATOR EFFECTIVENESS	Low			High		

Knowledge of the subject / topics covered

Style and delivery

Responsiveness to the group

Motivational approach towards the participants

Ability to engage / involve participants

# Training Feedback



PAX NAME:	RAJAT ROY CHOWDHURY	EMP CODE:				
SUBJECT/CLIENT:	MS Excel/Singhania & Sons Pvt. Ltd.	Email:	rajat.roy@singhania-group.com			
FACILITATOR NAME	Rashid Rizwi	MOB:	9830552659			
		DATE:	28 <sup>th</sup> June to 1 <sup>st</sup> July 2022			
PROGRAM EFFECTIVENESS	1	2	3	4	5	Specific points for action, if any
	Low			High		

To what extent has your understanding of the subject improved as a result of the program?

To what extent has the program been useful for you?

To what extent has the program been relevant for your role?

Will you recommend this program to your colleague/friends?

Facilitator	1	2	3	4	5	Specific points for action, if any
FACILITATOR EFFECTIVENESS	Low			High		
Knowledge of the subject / topics covered	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Style and delivery	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Responsiveness to the group	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Motivational approach towards the participants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Ability to engage / involve participants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	



# Training Feedback



PAX NAME:	SHILA DAS	EMP CODE:				
SUBJECT/CLIENT:	MS Excel/Singhania & Sons Pvt. Ltd.	Email:	shiladas.2@gmail.com			
		MOB:	8981552734			
FACILITATOR NAME	Rashid Rizwi	DATE:	28 <sup>th</sup> June to 1 <sup>st</sup> July 2022			
PROGRAM EFFECTIVENESS	1	2	3	4	5	Specific points for action, if any
	Low			High		

To what extent has your understanding of the subject improved as a result of the program?

To what extent has the program been useful for you?

To what extent has the program been relevant for your role?

Will you recommend this program to your colleague/friends?

Facilitator	1	2	3	4	5	Specific points for action, if any
FACILITATOR EFFECTIVENESS	Low			High		

Knowledge of the subject / topics covered

Style and delivery

Responsiveness to the group

Motivational approach towards the participants

Ability to engage / involve participants

# Training Feedback



PAX NAME:	MITHUN MLIKHERJE	EMP CODE:				
SUBJECT/CLIENT:	MS Excel/Singhania & Sons Pvt. Ltd.	Email:				
FACILITATOR NAME	Rashid Rizwi	MOB:				
		DATE:	28 <sup>th</sup> June to 1 <sup>st</sup> July 2022			
PROGRAM EFFECTIVENESS	1	2	3	4	5	Specific points for action, if any
	Low				High	

To what extent has your understanding of the subject improved as a result of the program?

To what extent has the program been useful for you?

To what extent has the program been relevant for your role?

Will you recommend this program to your colleague/friends?

Facilitator	1	2	3	4	5	Specific points for action, if any
FACILITATOR EFFECTIVENESS	Low				High	

Knowledge of the subject / topics covered

Style and delivery

Responsiveness to the group

Motivational approach towards the participants

Ability to engage / involve participants



# Training Feedback



PAX NAME:	SUPRIYO BAIDYA					EMP CODE:	
SUBJECT/CLIENT:	MS Excel/Singhanian & Sons Pvt. Ltd.					Email:	Supriyo.baidya@singhaniangroup.com
FACILITATOR NAME	Rashid Rizwi					MOB:	9932959038
						DATE:	28 <sup>th</sup> June to 1 <sup>st</sup> July 2022
PROGRAM EFFECTIVENESS	1	2	3	4	5	Specific points for action if any	
	Low				High		

To what extent has your understanding of the subject improved as a result of the program?

To what extent has the program been useful for you?

To what extent has the program been relevant for your role?

Will you recommend this program to your colleague/friends?

Facilitator	1	2	3	4	5	
FACILITATOR EFFECTIVENESS	Low				High	Specific points for action, if any

Knowledge of the subject / topics covered

Style and delivery

Responsiveness to the group

Motivational approach towards the participants

Ability to engage / involve participants

# Training Feedback



PAX NAME:	BHARAT CHAUDHARY	EMP CODE:	
SUBJECT/CLIENT:	MS Excel/Singhania & Sons Pvt. Ltd.	Email:	bharat@singhania-group.com
		MOB:	9674530686
FACILITATOR NAME	Rashid Rizwi	DATE:	28 <sup>th</sup> June to 1 <sup>st</sup> July 2022

PROGRAM EFFECTIVENESS	1	2	3	4	5	Specific points for action, if any
	Low				High	

To what extent has your understanding of the subject improved as a result of the program?

To what extent has the program been useful for you?

To what extent has the program been relevant for your role?

Will you recommend this program to your colleague/friends?

Facilitator	1	2	3	4	5	Specific points for action, if any
	Low				High	

Knowledge of the subject / topics covered

Style and delivery

Responsiveness to the group

Motivational approach towards the participants

Ability to engage / involve participants



# Training Feedback



PAX NAME:	<i>Ratna Banerjee</i>	EMP CODE:				
SUBJECT/CLIENT:	MS Excel/Singhania & Sons Pvt. Ltd.	Email:	<i>marketing@singhania.com</i>			
FACILITATOR NAME	Rashid Rizwi	MOB:	<i>8420114223</i>			
		DATE:	28 <sup>th</sup> June to 1 <sup>st</sup> July 2022			
PROGRAM EFFECTIVENESS	1	2	3	4	5	Specific points for action, if any
	Low			High		

To what extent has your understanding of the subject improved as a result of the program?

To what extent has the program been useful for you?

To what extent has the program been relevant for your role?

Will you recommend this program to your colleague/friends?

Facilitator	1	2	3	4	5	Specific points for action, if any
FACILITATOR EFFECTIVENESS	Low			High		

Knowledge of the subject / topics covered

Style and delivery

Responsiveness to the group

Motivational approach towards the participants

Ability to engage / involve participants