OFFICE OF THE DEAN PLANNING AND DEVELOPMENT NATIONAL INSTITUTE OF TECHNOLOGY, TRICHIRAPPALLI

FEED BACK FORM FOR AUDIO MAINTENANCE FOR COMMON HALLS

: (A-2/ A-11/A-12/A-13/ EEE Auditorium/Barn)

1.Allocated Hall

2.Name of the proposed	programme	:			
3. Date(s) of the propose	ed programme	:			
4. Actual Time Duration	(s)	:			
5. Please provide feedbarevent)(Please put √marks on the			d LCD proj	ector (if utilized	during the
	Very Unsatisfactory	Unsatisfactory	Neutral	satisfactory	Very satisfactory
Performance of audio system during the event	Chisatisfactory				satisfactory
Performance of LCD projection system					
Operational support from the audio maintenance personnel					
Any other observations/ suggestions about the hall					
6.Name of the event co-	ordinator & Depa	rtment :			
7. Signature of the event co-ordinator:				Date:	
8. Name and signature of the AMC support personnel on duty:				Date:	