



ABHINAV BHARAT SHIKSHAN SANSTHA'S
NETAJI SUBHASHACHANDRA BOSE ARTS, COMMERCE AND SCIENCE COLLEGE, NANDED.
INTERNAL QUALITY ASSURANCE CELL (IQAC)
www.nsbcn.org email-iqacnsb@gmail.com

Registration Form

Name of the activity-

Date:

Name of the Participant -----

Contact Number -----

Email ID-----

Designation -----

Department / Section -----

Signature of the Participant



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Feedback Form

Name of the activity-

Date:

Name of the Participant -----

Contact Number -----

Email ID-----

Designation -----

Department / Section -----

Activity Name -----

About	Very Good	Good	Fair	Satisfactory
Organization				
Sessions				
Resource Person				
Hospitality				
Overall Rating				

Signature of the Participant

Activity Report

Department of -----

Date- -----

Name of the activity - -----

Name of the topic- -----

Objective-

1 -

2 -

Name of the Resource person- -

Number of the participants- -

Outcome-

1 -

2 -

Brief Report: -

Attachment-

- i. Photo
- ii. PPT
- iii. Registration form and Feedback

Convenor