

FEEDBACK FORM

Date:

Name of the Researcher:

College/University:

Country:

Contact Number:

Email:

	PLEASE FEEDBACK US!!	Excellent/ Good/ Poor
1	Results of the Activity	
2	Images of the Activity	
3	Communication of the Lab Assistant/Director with you	

1. Are you satisfied with the results?

2. How do you know about our institute?

3. Is your results on time?

4. Two words about our research service.....

Signature of the Researcher

!!THANK YOU!!

Your idea our service.....!!

Visit us again.....!!