



**OFFICE OF THE DIRECTOR / PRINCIPAL
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**INDUSTRIAL PRACTICAL TRAINING EVALUATION SHEET FROM
ORGANIZATION**

(TO BE FILLED BY SUPERVISOR IN TRAINING ORGANIZATION/INSTITUTE)

NAME OF STUDENT (TRAINEE): _____

NAME AND DESIGNATION OF SUPERVISOR: _____

CONTACT NUMBER/EMAIL ID OF SUPERVISOR: _____

NAME AND ADDRESS OF ORGANIZATION: _____

NAME OF TRAINING PROJECT: _____

DURATION OF TRAINING: FROM _____ TO _____

MARKS TO BE AWARDED TO THE STUDENTS BASED ON THE FOLLOWING CRITERIA:

Sr.No.	CRITERIA	TOTAL MARKS	MARKS OBTAINED
1.	Technical Quality of Work (25)		
a.	Knowledge of basic concepts in civil engineering	5	
b.	Knowledge of civil engineering practices	5	
c.	Application of concepts to solve technical problems	5	
d.	Ability to experiment and analyse the data to achieve desired results	5	
e.	Communication	5	
2.	Attendance, Discipline, Involvement	15	
3.	Interest Shown by Student to Gain Knowledge of Latest Technologies to Solve Engineering Problems Related to Environment or Society	10	
	TOTAL	50	

NOTE:

This evaluation must be done by the worthy supervisor/guide of the respective organization/industry according to his/her observation of the students' performance in the training.

Signature of Supervisor with Stamp/Seal