

Name of the Company	:	
Name of the Employee	:	
Designation	:	
Email	:	
Contact No.	:	

W.Co.		Shanti	Educati	on Society	S		
	A. G. Pat	il Institu	te of	Techn	ology	, Sola	p
	<u></u>	mployee Fe	edback	Form			
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Abili	y to take up extra responsibility	7				
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1 2 3 4 5	Poor Fair Good Very Good Excellent					
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1	Poor
2	Fair
3	Good
4	Very Good
5	Excellent