



“Education for Knowledge, Science and Culture”  
-Shikshanmaharshi Dr. Bapuji Salunkhe

**Vivekanand College, Kolhapur  
(Autonomous)  
Internal Quality Assurance Cell  
2021-22**

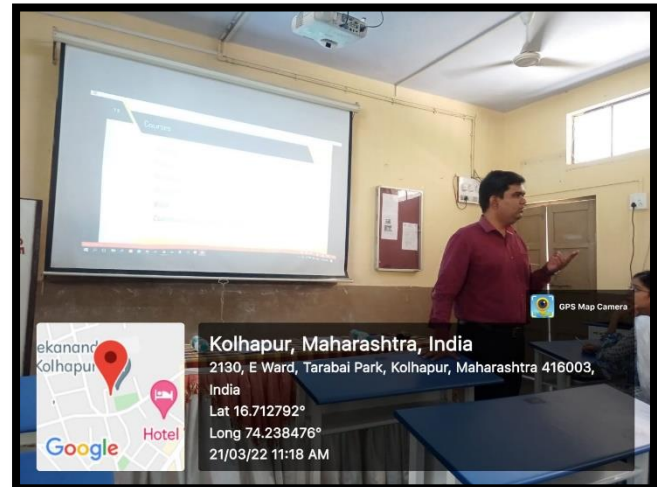
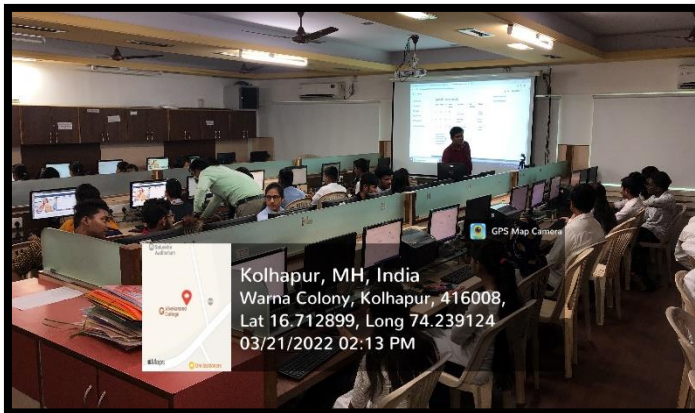


**Criteria V- Activities Report**

1. **Name of Department:** - Computer Science
2. **Name of Organized Activity:** - Shivaji University Sponsored Lead college activity Under D.R.K. Commerce College, Kolhapur One Day Workshop on “**Blended Learning with LMS MOODLE**”
3. **Date/ Duration:** - 21/03/2022
4. **Aims and Objectives:** -
  - To aware the students and faculty members from Shivaji University cluster about learning management system in accordance with blended learning on Moodle environment.
  - To give the hands-on training on Moodle platform.
5. **No. of beneficiaries:** - 64
6. **Expenditure & funding agency:** - Rs.12,000 Sponsored by Shivaji University, Kolhapur.
7. **Brief description:** - Resource Person: - Mr. Ajay Kapase, Assistant Professor, KIT’s College of Engineering, Kolhapur. Two back-to-back sessions were delivered by the resource person in which first session was based on the introduction of blended learning, LMS and Moodle and theoretical aspects in LMS and the second session was totally on Hands on training to create all participants own Moodle.

8. **Outcomes:-** The participant faculty members has developed their own Moodle using gnomio and created their Mooc courses and the participant students were joined the courses created by their teacher also the faculty members were designed one test by adding the question sets and the same was attempted by the students. **The faculty members from 5 different colleges were started using their own Moodle with the help of the workshop.**

9. **Photos: -**



Department of Computer Science

Date: 11/03/2022

To,  
The Principal,  
Vivekanand College (Autonomous),  
Kolhapur.

**Subject:** Permission to organize a **Lead College Workshop** on “**Blended Learning with LMS MOODLE**” on Monday 21 March 2022.

Respected Sir,

As per the subject cited above, Lead college activity workshop entitled “**Blended Learning with LMS MOODLE**” has been sanctioned to our department, so we are going to organize the same on Monday 21 March 2022.


We have invited **Mr. Ajay Babasaheb Kapase, Assistant Professor KIT's College of Engineering, Kolhapur** as an expert resource person.

So, I request you to please give us the permission to organize the same in the **Library Hall** on the said date.

Also, I request you to please give us the **advance of Rs. 12,000/-** to organize the same.

Thanking you,

Sincerely Yours

  
Dr. V. B. Waghmare  
Head of Department

Dept. of Computer Science  
Vivekanand College, Kolhapur.

skri: JGG  
Pay Adv. Rs. 12000/-  
12/3/2022



"ज्ञान, विज्ञान आणि सुसंस्कार यांसाठी शिक्षणप्रसार  
- शिक्षणमहर्षी डॉ. बापुजी साळुंखे

## Vivekanand College, Kolhapur (Autonomous)

Ref:

Date: 15-03-2022

### NOTICE

All the Senior College Heads of Department are hereby informed that on **Monday 21 March 2022 at 10:30AM** onwards the Department of Computer Science has organized a Lead College Workshop on "**Blended Learning with LMS Moodle**" in Room No.14 followed by Hands on session in Computer Lab.

You are requested to spare one of your faculty member to attend the said workshop. Be present on time and actively participate in the event by following Covid-19 protocols.

  
Dr. R. R. Kumbhar

PRINCIPAL  
Vivekanand College  
Kolhapur

“Dissemination of Education for Knowledge, Science and Culture.”

– Shikshanmaharshi Dr. Babuji Salunkhe

Shri Swami Vivekanand Shikshan Sanstha's

## **Vivekanand College, Kolhapur (Autonomous)**

Department of Computer Science,

*Shivaji University, Kolhapur, DRK Commerce College, Kolhapur Cluster Sponsored*

Organized

### **LEAD COLLEGE ACTIVITY**

## ***Workshop on “Blended Learning with LMS Moodle”***

On Monday 21<sup>st</sup> March 2022 at 10:30am to 05:00pm

### **PROGRAM SCHEDULE**

<b>10:30am</b>	Inauguration by Hon'ble Principal <b>Dr. R. R. Kumbhar</b> by watering a plant
<b>10:31am</b>	Sanstha Prarthana
<b>10:32am</b>	Introductory Speech about Workshop by <b>Dr. V. B. Waghmare</b>
<b>10:34am</b>	Wel-come of the Guests
<b>10:36am</b>	Presidential Speech by <b>Dr. R. R. Kumbhar</b>
<b>11:00am</b>	Vote of thanks of inauguration by <b>Dr. I. K. Mujawar</b>
<b>11:01am</b>	Introduction of the Guest by <b>Ms. Mrunal Dinde</b>
<b>11:03am</b>	Session – I ( <b>Mr. Ajay Kapase</b> , KITs College of Engineering, Kolhapur) ( <b>Room No. 14</b> )
<b>01:00pm</b>	Lunch Break
<b>2:00pm</b>	Session-II Hands on Session ( <b>Mr. Ajay Kapase</b> ) ( <b>Lab</b> )
<b>4:30pm</b>	Question answer session
<b>4:50pm</b>	Vote of thanks by <b>Ms. S. Z. Mullani</b>
	(Anchoring by <b>Ms. Rajashree Patil</b> )

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# श्री स्वामी विवेकानंद शिक्षण मंस्थेचे विवेकानंद कॉलेज, कोल्हापूर (स्वायत्त)

२१३०, ई, ताराबाई पार्क, कोल्हापूर, ता. करवीर, जि. कोल्हापूर - ४१६ ००३

शिवाजी विद्यापीठ, कोल्हापूर संलग्नीत

नेक मानांकन : 'A' (सी.जी.पी.ए. ३.२४)

कॉलेज उईथ पोटेन्शियल फॉर एक्सलन्स, यु.जी.सी., न्यु दिल्ली

स्टार कॉलेज - डी.बी.टी. - भारत सरकार

आय.एस.ओ. १००१:२०१५



(स्वायत्त) कोल्हापूर

Ph. : 0231-2658612, 2658840 Fax : 0231-2658840 Resi. : 0231-2653962 Website : www.vivekanandcollege.org E-mail : info@vivekanandcollege.org

संस्थापक डॉ. बापूजी साळुंखे D. Lit.	अध्यक्ष मा. आमदार चंद्रकांत दादा पाटील MLA	कार्याध्यक्ष प्राचार्य अभयकुमार साळुंखे M.A.	सचिव प्राचार्या सौ. शुभांगी गावडे M.Sc., B.Ed.	प्राचार्य डॉ. आर. आर. कुंभार M.Sc. M.Phil. Ph.D.
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जावक क्रमांक वि.सी.के. / 2112/2021-22

दिनांक : 15.3.2022

To,

Mr. Ajay Kapase

KIT's College of Engineering,  
Kolhapur

Sir,


It gives me immense pleasure in inviting you for Seminar under Lead College activity of Shivaji University, Kolhapur to be held at Department of Computer Science, Vivekanand College, Kolhapur on Monday 21<sup>st</sup> March, 2022 at 10:30am on the topic entitled “Blended Learning with LMS Moodle”.

Our college is reaccredited with 'A' grade by NAAC with CGPA 3.24 in the third cycle. The college has been recognized as the College with Potential for Excellence (CPE) by the UGC, and included in the Star College scheme by the Dept. of Bio-technology, Govt. of India. Our College is striving hard for excellence in different areas of research needed for the development of the region and academics to explore talent of the potential researchers and students.

In view of this, I take this opportunity to invite you to give a Seminar for our faculty and students.

Best regards.

OLC

  
(Dr. R. R. Kumbhar)  
PRINCIPAL  
Vivekanand College  
Kolhapur



Shri Swami Vivekanand Shikshan Sanstha's  
**VIVEKANAND COLLEGE, KOLHAPUR (AUTONOMOUS)**

2130, 'E' Tarabai Park, Kolhapur, Tal. Karveer, Dist. Kolhapur-416003

Affiliated to Shivaji University, Kolhapur (M.S.)

NAAC Reaccredited : "A" (CGPA 3.24)

College with Potential for Excellence by U.G.C., New Delhi

"Star College" by D.B.T. Govt. of India

ISO 9001 : 2015



(स्वायत्त) कोल्हापूर

Ph. : 0231-2658612, 2658840 Fax : 0231-2658840 Resi. : 0231-2653962 Website : www.vivekanandcollege.org E-mail : info@vivekanandcollege.org

Founder Dr. Bapuji Salunkhe D. Lit.	President Hon. Chandrakant Dada Patil MLA	Chairman Prin. Abhaykumar Salunkhe M.A.	Secretary Prin. Mrs. Shubhangi Gavade M.Sc., B.Ed.	Principal Dr. R. R. Kumbhar M.Sc. M.Phil. Ph.D.
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Ref. No. VCK/ 2169/2021-22

Date : 21.3.2022

To,  
Mr. Ajay Kapase  
KIT's College of Engineering,  
Kolhapur

Sir,

Thank you for delivering a seminar under Lead College activity of Shivaji University, Kolhapur at Department of Computer Science, Vivekanand College, Kolhapur. The lecture and hands on session was greatly appreciated and well received by the participant. The Department of Computer Science, Vivekanand College, Kolhapur would like to express deep sense of gratitude for your esteemed Co-operation.

I hope for your continuous support in the future.

O/c

*R.R.K.*  
(Dr. R. R. Kumbhar)  
PRINCIPAL  
Vivekanand College  
Kolhapur



# विवेकानंद कॉलेज, कोल्हापूर (स्वायत्त)

२१३०, ई, ताराबाई पार्क, कोल्हापूर, ता. करवीर, जि. कोल्हापूर - ४१६ ००३

शिवाजी विद्यापीठ, कोल्हापूर संलग्नीत

नॅक मानांकन : 'A' (सी.जी.पी.ए. ३.२४)  
कॉलेज उईथ पोटेन्शियल फॉर एक्सलन्स, यु.जी.सी., न्यु दिल्ली  
स्टार कॉलेज - डी.बी.टी. - भारत सरकार  
आय.एस.ओ. ९००१:२०१५



Ph. : 0231-2658612, 2658840 | Fax : 0231-2658840 | Resi. : 0231-2653962 | Website : www.vivekanandcollege.org | E-mail : info@vivekanandcollege.org

संस्थापक  
डॉ. बापूजी साळुंखे  
D. Lit.

अध्यक्ष  
मा. आमदार चंद्रकांत दादा पाटील  
MLA

कार्याध्यक्ष  
प्राचार्य अभयकुमार साळुंखे  
M.A.

सचिव  
प्राचार्या सौ. शुभांगी गावडे  
M.Sc., B.Ed.

प्राचार्य  
डॉ. आर. आर. कुंभार  
M.Sc. M.Phil. Ph.D.

जावक क्रमांक व्हि.सी.के. / 2113/2021-22

दिनांक : 15.3.2022

प्रति,

मा. प्राचार्य,

डी.आर.के. कॉलेज ऑफ कॉमर्स क्लस्टर अंतर्गत सर्व महाविद्यालय

**विषय:** अग्रणी महाविद्यालय योजने अंतर्गत कार्यशाळेबाबत...

महोदय,

उपरोक्त विषयान्वये शैक्षणिक वर्ष २०२१-२२ मध्ये आमच्या महाविद्यालयात अग्रणी महाविद्यालय योजना (डी. आर. के. कॉमर्स कॉलेज, कोल्हापूर क्लस्टर) अंतर्गत येथील कॉम्प्युटर सायन्स विभागांतर्गत "Blended Learning with LMS Moodle" या विषयावर एक दिवसीय कार्यशाळा सोमवार दि. २१.०३.२०२२ रोजी सकाळी १०.३० ते ५.०० या वेळेत रूम नंबर १४ मध्ये आयोजित केली आहे. तरी आपल्या महाविद्यालयातील एक प्राध्यापक व चार विद्यार्थी या कार्यशाळेस पाठवून द्यावेत ही विनंती सहभागी विद्यार्थी संख्या व प्राध्यापक यांची नोंदणी खाली दिलेल्या e-mail ID अथवा फोन नंबर वर दि. १९.०३.२०२२ पर्यंत कळविण्यात यावी.

कार्यशाळा समन्वयक:

डॉ. व्ही. बी. वाघमारे

फोन. नं. 9860625005

E-mail: vishal.pri12@gmail.com

कळावे,

आपला विश्वासू,

(डॉ. आर. आर. कुंभार)

प्राचार्य

विवेकानंद कॉलेज  
कोल्हापूर



Principal : Dr. V. M. Patil

M.A., M. Phil., Ph.D.

E-mail : nck30.cl@unishivaji.ac.in

website : www.newcollege.ac.in

Phone : 0231-2621187



CENTENARIAN AND AWARDEE OF 'IDEAL' INSTITUTION'  
BY GOVERNMENT OF MAHARASHTRA  
SHRI PRINCE SHIVAJI MARATHA BOARDING HOUSE'S  
**THE NEW COLLEGE, KOLHAPUR**  
(ARTS, COMMERCE, SCIENCE, B.B.A. B.C.A., B.Sc. Com. Sci. (Entire))  
(Affiliated to Shivaji University, Kolhapur) **NAAC A+ Grade**  
1062, 'A' Ward, Shivaji Peth, Kolhapur - 416012 (Maharashtra)

## CELEBRATING GOLDEN JUBILEE YEAR

Ref. No. : NCK/ 2367 / 2021-22

Date : 17 MAR 2022

प्रती,  
मा. प्राचार्यसो,  
विवेकानंद कॉलेज,  
कोल्हापूर

विषय : कार्यशाळेत विद्यार्थ्यांना सहभागी करून घेणे बाबत.....

महोदय,

आपल्या महाविद्यालयातील संगणकशास्त्र विभागाच्या वतीने अग्रणी महाविद्यालय योजने अंतर्गत " Blended Learning with LMS Moodle " या विषयावर आयोजित १ दिवसीय कार्यशाळेसाठी खाली विद्यार्थ्यांना सहभागी होण्यासाठी सोमवार दि. २१ मार्च २०२२ रोजी पाठवीत आहोत. तरी त्यांचा सहभाग नोंदवून सहकार्य करावे हि विनंती. कळावे,

आपला विश्वासू,  
प्राचार्य,  
न्यू कॉलेज, कोल्हापूर

➤ सहभागी होणाऱ्या विद्यार्थ्यांची नावे खालीलप्रमाणे.....

अ.क्रं	विद्यार्थ्यांचे नाव	वर्ग
१.	कु. निराली ममियाना	बी.एस्सी भाग ३
२.	कु. प्रतीक्षा मोरे	बी.एस्सी भाग ३
३.	कु. तेजल जाधव	बी.एस्सी भाग ३
४.	कु. ओंकार साळोखे	बी.एस्सी भाग ३
५.	प्रा. स्नेहाली सुरज शिंदे	संगणकशास्त्र विभाग



Sangrul Education Society's

**S. B. KHADÉ MAHAVIDYALAYA, KOPARDE**

Tal. Karvir, Dist. Kolhapur

NAAC – B Grade

I/C Principal, V. M. Suryavanshi

M. A.

Email-[principalsbkhade@yahoo.in](mailto:principalsbkhade@yahoo.in)

Office – 0231 2444307

Mobile: 9421110871

Ref.No. SBK/21.22 / Lead College

Date : 16 /03 /2022

प्रति,

सन्मा प्राचार्य / समन्वयक,  
विवेकानंद कॉलेज, कोल्हापूर  
ताराबाई पार्क

विषय - विद्यार्थ्यांना सहभागी करून घेणे बाबत

महोदय,

आपल्या महाविद्यालयामध्य डी. आर. के. कॉलेज, कोल्हापूर यांच्या अग्रणी महाविद्यालय अंतर्गत घेतल्या जाणा-या **Blended Learning with LMS Moodle** या विषयावर आधारित सोमवार दि. २१/०३/२०२२ रोजी होणा-या कार्यशाळेस खालील विद्यार्थी उपस्थित राहत आहेत. तरी सदर विद्यार्थ्यांना सहभागी करून घ्यावे ही विनंती.

अ न	विद्यार्थ्यांचे नांव	वर्ग	शेरा
१	प्रा. सौ मस्कर शारदा प्रकाश	-	प्राध्यापक
२	कु. तळेकर अपर्णा अशोक	बी एस्सी भाग एक	विद्यार्थी
३	कु. सुर्यवंशी अरुंधती प्रकाश	बी एस्सी भाग एक	विद्यार्थी
४	कु लव्हेटे सानिका गजानन	बी एस्सी भाग एक	विद्यार्थी
५	कु पाटील सुलोचना सुखदेव	बी एस्सी भाग एक	विद्यार्थी

कळावे,

आपला विश्वास

*Smy*  
(प्रा. व्ही. एम. सुर्यवंशी)  
PRINCIPAL

S. B. Khade Mahavidyalaya, Koparde  
Tal. Karvir, Dist. Kolhapur

# Vivekanand College, Kolhapur (Autonomous)

Department of Computer Science,






## LEAD COLLEGE ACTIVITY

Workshop on "Blended Learning with LMS Moodle"

### REGISTRATION SHEET

Date: 21/03/2022









Time: 09:30AM





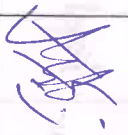



Sr. No.	Name of the Participant in CAPITAL LETTERS	Class	College Name	Letter from College	Kit	Food Coupon	Sign
1.	Ms. SHINDE SNEHALI SURAJ 7588228041	Teacher	The New College, Kolhapur	✓	✓	✓	
2.	Ms. NIRALI MAMANIYA 7666107352	B.Sc. III	The New College, Kolhapur	✓	✓	✓	
3.	Ms. TEJAL JADHAV	B.Sc. III	The New College, Kolhapur 7822849445	✓	✓	✓	
4.	Ms. PRAKISHA MORE	B.Sc. III	The New College, Kolhapur 7066290545	✓	✓	✓	
5.	Mr. OMKAR SALOKHE	B.Sc. III	7249679644 The New College, Kolhapur	✓	✓	✓	

6.	Ms. MESTRI RIMA RAM	Teacher	Mahavir College, Kolhapur 7588078103	✓	✓	✓	<i>[Signature]</i>
7.	Ms. MAITHLI KAGWADE	B.Sc. III	Mahavir College, Kolhapur 9604586763	✓	✓	✓	<i>[Signature]</i>
8.	Ms. MOHINI KOLI	B.Sc. III	Mahavir College, Kolhapur 7498126212	✓	✓	✓	<i>[Signature]</i>
9.	Ms. AARATI RAI	B.Sc. III	Mahavir College, Kolhapur 9028673906	✓	✓	✓	<i>[Signature]</i>
10.	Ms. SAKSHI MAHUTKAR	B.Sc. III	Mahavir College, Kolhapur 8459387278	✓	✓	✓	<i>[Signature]</i>
11.	Ms. MASKAR SHARDA PRAKASH	Teacher	S. B. Khade Mahavidyalaya, Koparde 9588472544	✓	✓	✓	<i>[Signature]</i>
12.	Ms. TALEKAR APARNA ASHOK	B.Sc. I	S. B. Khade Mahavidyalaya, Koparde 8766504396	✓	✓	✓	<i>[Signature]</i>
13.	Ms. SURYAWANSHI ARUNDHATI PRAKASH	B.Sc. I	S. B. Khade Mahavidyalaya, Koparde 9836411701	✓	✓	✓	<i>[Signature]</i>





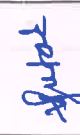



Sr. No.	Name of the Participant in CAPITAL LETTERS	Class	College Name	Letter from College	Kit	Food Coupon	Sign
14.	Ms. LAVTE SANIKA GAJANAN	B.Sc. I	S. B. Khade Mahavidyalaya, Koparde 8390628182	✓	✓	✓	<u>Velshak</u>
15.	Ms. PATIL SULOCHANA SUKHDEV	B.Sc. I	S. B. Khade Mahavidyalaya, Koparde 8626064979	✓	✓	✓	<u>S. Patil</u>
16.	Ms. Jadhav Putva 9923031225 Sunil	BSc II	The New College, Kolhapur	✓	✓	✓	<u>Pradham</u>
17.	Mr. D. B. medhe	Teacher	G. K. G College	✓	✓	✓	<u>[Signature]</u>
18.	Akshata S. chavan	BSc. III	G. K. G college	✓	✓	✓	<u>Akshata</u>
19.	Saniya. F. Mujawar.	B.sc. III	G. K. G college	✓	✓	✓	<u>Saniya</u>
20.	Yadav N. S.	Teacher	R. C. Shahy Colley C	✓	✓	✓	<u>[Signature]</u>




Sr. No.	Name of the Participant in CAPITAL LETTERS	Class	College Name	Letter from College	Kit	Food Coupon	Sign
21	Narendra Karanbina Sarmaik 7020511257	B.Sc.CS III	Gokhale Collage, Kolhapur	✓	✓	✓	
22	Aditya Lohar 9767281653	B.Sc.S III	G.K.G college Kolhapur.	✓	✓	✓	
23	Dnyanesh Sutar 901787670	B.Sc.S. III	G.K.C college Kolhapur.	✓	✓	✓	
24	Peojakha Rajaram Khamkar 9404 9385038737	B.C.S- 3	R.C.S.C. Kolhapur	✓	✓	✓	
25	Dipoli Sanjay Yamgekar 9604222167	B.C.S- 2	R.C.S.C. Kolhapur	✓	✓	✓	
26	Navnath Popet Akhade 9767381292	B.C.S 3	R.C.S.C. Kolhapur	✓	✓	✓	
27	Balaji Prakash Devta 7038575658	B.C.8 3	R.C.S.C. Kolhapur	✓	✓	✓	

Sr. No.	Name of the Participant in CAPITAL LETTERS	Class	College Name	Letter from College	Kit	Food Coupon	Sign
26	Akshata Suhās Mahadik	B.Sc-III	Vivekanand college, Kolhapur			✓	
27	Saniya Harun Garadi	B.Sc-III	Vivekanand college, Kolhapur			✓	
28	Tasmiya Kasim Jamadar	B.Sc-III	Vivekanand college, Kolhapur			✓	
29	Preeti Manohar Katyur	Bsc-III	Vivekanand College, Kolhapur.			✓	
30	Kajal Fakhmichand Katiyoz	Bsc - III	"			✓	
31	Vaishnavi Ravaso Jadhav	Bsc III	Vivekanand College, Kolhapur			✓	
32	Rajvaadhan. S. Magdum	BSc-III	— II —			✓	
33	Pratik Pradeep Chavan	Bsc III	Vivekanand college Kolhapur			✓	

Sr. No.	Name of the Participant in CAPITAL LETTERS	Class	College Name	Letter from College	Kit	Food Coupon	Sign
94	Rajvardhan . S. Magdam	B.Sc III	Vivekanand college Kolhapur			✓	
95	Kirti Pravin Shinde	B.Sc III	Vivekanand college Kolhapur			✓	
96	Shrutej Subhash Patil	B.Sc III	Vivekanand college Kolhapur			✓	
97	Shetal Sanjay Patil	B.Sc III	Vivekanand college Kolhapur			✓	
98	Ashrafali Akhtarhusein Mulla	B.Sc III	Vivekanand college Kolhapur			✓	
99	Nishrajesh Ganesh Sutar	B.Sc III	Vivekanand college Kolhapur			✓	
100	Shetal sudhakar Nemale	B.Sc III	Vivekanand College Kolhapur			✓	
101	Saravdhan Aml. Arade,	B.Sc III	Vivekanand College Kolhapur			✓	



Sr. No.	Name of the Participant in CAPITAL LETTERS	Class	College Name	Letter from College	Kit	Food Coupon	Sign
44	Ananya Balwant Kadwate	B.Sc III	Vivekanand College, Kolhapur			✓	
45	Sammed Rajgonda Patil	B.Sc III	Vivekanand College, Kolhapur			✓	
46	Pankaj Vishny Khandare	B.Sc III	— / —			✓	
47	Santosh Subhash Patil	B.Sc III	Vivekanand College, Kolhapur			✓	
48	VAISHNAVI SURESH SUTAR	B.Sc III	Vivekanand College, Kolhapur			✓	
49	KARISHMA RAJANLAL MALI	B.Sc III	Vivekanand College, Kolhapur			✓	
50	Harshada Sanjay Sutar	B.Sc III	Vivekanand College, Kolhapur			✓	
51	Poonam Sanjay Giri	B.Sc III	Vivekanand College, Kolhapur			✓	

Sr. No.	Name of the Participant in CAPITAL LETTERS	Class	College Name	Letter from College	Kit	Food Coupon	Sign
62	Aadish Satish Patil	BSc III				✓	
63	Ehad Sanket Sanyal	BSc III				✓	
64	Sunil Ansh Patil	BSc III				✓	
65							
66							
67							
68							
69							

# Vivekanand College, Kolhapur (Autonomous)

Department of Computer Science,



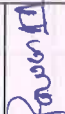
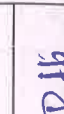



## LEAD COLLEGE ACTIVITY

Workshop on "Blended Learning with LMS Moodle"

### REGISTRATIONS FOR VCK FACULTY/STUDENTS

Date: 21/03/2022

Time: 09:30AM

Sr. No.	Name of the Participant in CAPITAL LETTERS	Class	College of Department	Sign
1.	Samirik Kabirkusek mullawi		computer sci.	
2.	MRUNAL PANDIT DINDE		computer sci.	
3.	Pawar Aji't Anjun		Statistics	
4.	Patil Poonam Chandrakant		statistics	
5.	Mekandaz Ashiyana Mahamadropik		Statistics	
6.	Dr. Jyoti Mahadev Genule		Botany	
7.	Dr. Sneha Sampatras Desai.		Zoology	



# Vivekanand College, Kolhapur (Autonomous)

Department of Computer Science,













## LEAD COLLEGE ACTIVITY

Workshop on "Blended Learning with LMS Moodle"

### Attendance

Date: 21/03/2022

Time: 10:30AM

Sr. No.	Name of the Participant	Class	College Name	Session-I Signature	Session-II Signature
1.	Chougale Ketan Krishnat	B.Sc III	Vivekanand College Kolhapur		
2.	Patil Rohan Ashok	B.Sc III	" "		
3.	Patil Santosh Subhash	B.Sc III	" "		
4.	Kadwale Ananya Balwant	B.Sc - III	" "		
5.	Khondare Pankaj Vishnu	B.Sc III	" "		
6.	Shivane Ashutosh Dhanaji	B.Sc III	" "		
7.	Patil Sujit Sunil	B.Sc III	" "		

8	Shrihari Subhash Patil	B.Sc - III	Vivekanand College Kolhapur.	Patil	Patil
9	Pratik Pradeep Dovan	B.Sc - III	Vivekanand College Kolhapur	Dovan	Dovan
10	Abhishek Ajit Patil	B.Sc - III	Vivekanand College Kolhapur	Patil	Patil
11	Ashrafali A. Mulla	B.Sc - III	Vivekanand College Kolhapur	Mulla	Mulla
12	Pravaran S. Magdum	B.S.C. III	Vivekanand college Kolhapur	Patil	Patil
13	Nishu S. J. G. G. G. G.	B.Sc. III	Vivekanand college Kolhapur	G. G. G.	G. G. G.
14.	Dnyanesh R. Sutar	B.Sc III	Gokhale College, Kolhapur	Sutar	Sutar
15	Manendra K. Sarvade	B.Sc. CS III	Gokhale college Kolhapur	Sarvade	Sarvade
16	Aditya S. Lohar	B.Sc - CS - III	Gokhale college Kolhapur,	Lohar	Lohar
17	Mr. D. B. Medhve	Teacher	G. K. G. College, Kop	Medhve	Medhve
18	Balaji P. Devtar	B.C.S - III	R. I. S. C. Kolhapur	Devtar	Devtar
19	Navnath P. Akhade	B.C.S - III	R. I. S. C. Kolhapur	Akhade	Akhade

20	Onkar S. Salokhe	BSc - III <sup>rd</sup>	The New College, Kolhapur		
21	Ekal saaket Sasjeraso	BSc - III <sup>rd</sup>	Vivekanand college.		
22	Atadesh Satish Patil	BSc - III <sup>rd</sup>	Vivekanand College, Kolhapur		
23	Junil Jurnsh Patil	BSc - III <sup>rd</sup>	Vivekanand college, Kolhapur		
24	Samadhas Anil Asade.	BSc - III <sup>rd</sup>	Vivekanand college Kolhapur		
25	Sammed Rajgonda Patil	BSc - III <sup>rd</sup>	Vivekanand college Kolhapur		
26	Mrs. Masakar sharda P.	Teacher	S. B. Khade Mahavidyalay		
27	Arunhathi Prakash Suryawanshi	BSc - I	S. B. Khade Mahavidyalay		
28	Aparna Ashok Talekar	BSc - I	S. B. Khade Mahavidyalay		
29	Sanika Gajanan Kavhate.	BSc 1 <sup>st</sup>	S. B. Khade Mahavidyalay		
30	Bhargavi Ramting Kugaji	BSc III <sup>rd</sup>	Vivekanand College		
31	Nikita Subhash Patil	BSc III <sup>rd</sup>	Vivekanand College		

32	✓ Kajal Lakshmi Chand Katiyar	BSc III	Vivekanand College	Katiyar
33	✓ Karishma Kumari Mali	BSc III	Vivekanand College	Karishma Mali
34	✓ Preeti Manohar Katiyar	BSc III	Vivekanand College, Kolhapur	P. Katiyar
35	✓ Vaishnavi Ravasa Jadhav	BSc III	Vivekanand College Kolhapur	Jadhav
36	✓ Snehal Sudhakar Nirmale	BSc III	Vivekanand College Kolhapur	Nirmale
37	✓ Harshada Sanjay Sutar	BSc III	Vivekanand College Kolhapur	Harshada
38	✓ Poornam Sanjay Giri	BSc III	Vivekanand College, Kolhapur	Giri
39	✓ Dipali Sonjay Yampetkar	BSc III	R. C. S. C. Kolhapur	Yampetkar
40	✓ Pejajakta Rajaram Khamke	BSc III	R. C. S. C. Kolhapur	Khamke
41	✓ Akshaya Suhay Mahalik	BSc III	Vivekanand College Kolhapur	Mahalik
42	✓ Kaishnavi Rajendra Khurandale	BSc III	Vivekanand College Kolhapur	Khurandale
43	✓ Saniga Harun Garadi	BSc III	Vivekanand College,	Garadi



44	Jasmiya kasim Jamadar	BSC III	vivekanand college, kolhapur	<del>Jamadar</del>
45	Rutuja Amae Dinde	B.Sc III	vivekanand college Kolhapur	<del>Rutuj</del>
46	Aishwaryee Sunil Chavan	B.Sc III	Vivekanand College Kolhapur	<del>Sunwar</del>
47	Dr. Jyoti Mahadev Groule	Faculty [Botany]	—	<del>Jyoti</del>
48	Vaishnavi Suresh Swar	B.Sc III	vivekanand college kolhapur	<del>Swatok</del>
49	Sulochana Sukhadeo Patil	B.Sc I	S. B. Kade college Koparde	<del>Patil</del>
50	Mrunal Pandit Dinde	Faculty (Comp. Sci.)	vivekanand college kolhapur	<del>Dinde</del>
51	Dr. Sneha Sampatrao Desai	Faculty zoology	Vivekanand college Kolhapur	<del>Desai</del>
52	Pratiksha Pandurang Mox	B.Sc III C.S	The New College kolhapur	<del>P.P.mox</del>
53	Tejal Suresh Jadhav	B.Sc III C.S	The New college, kolhapur	<del>Jadhav</del>
54	Purva Sunil Jadhav	B.Sc III C.S	The New college, kolhapur	<del>Jadhav</del>
55	Nitali Paresh Mamaniya	Bsc III C.S	The New College kolhapur	<del>Mamaniya</del>

56.	Smt. Shinde Snehalis.	Asst. Professor	The New college, kop	<del>Shinde</del>	<del>Shinde</del>
57.	Smt. Meshi Rima R.	Asst. Prof.	Mahavir College, kop	<del>Meshi</del>	<del>Meshi</del>
58.	Miss. Kagavade Maithilis.	Feet student	Mahavir College, kop & Lagarwadis	<del>Kagavade</del>	<del>Kagavade</del>
59.	Miss, Koli Mohini S.	student	Mahavir college, kop	<del>Koli</del>	<del>Koli</del>
60.	Miss. Arati. N. Rai	student	Mahavir college kop	<del>Rai</del>	<del>Rai</del>
61.	Miss. Mahatkar Salshi.	Student	Mahavir College kop	<del>Mahatkar</del>	<del>Mahatkar</del>
62.	Kirti, P. Shinde	student	V. C. Kolhapur	<del>Shinde</del>	<del>Shinde</del>
63.	Snehal. S. Patil	student	N.C. Kolhapur	<del>Patil</del>	<del>Patil</del>
64.	Pratiksha. P. Mor	student	New college	<del>Mor</del>	<del>Mor</del>

“ ज्ञान, विज्ञान आणि सुसंस्कार यांसाठी शिक्षण प्रसार ”  
-शिक्षणमहर्षी डॉ. बापूजी साळुंखे

Shri. Swami Vivekananda Shikshan Sanstha, Kolhapur's  
**Vivekanand College, Kolhapur (Autonomous)**  
Workshop on  
“Blended Learning with LMS Moodle”  
under lead College Scheme, Shivaji University, Kolhapur  
Organized by  
**Department of Computer Science**

Date: 21<sup>st</sup> Mar 2022, Time: 09:30 am to 5:00 pm

Venue: Room No.14/Lab

**Feedback Form**

Your feedback is critical for our college to ensure we are meeting your educational needs. We would appreciate if you could take a few minutes to share your opinions with us so we can serve you better.

Name of Participant: Aditya Sanjay Lohar Class/College: Gokhale college

- Does workshop fulfilled your expectations?  Yes  No
- Whether the content was as described in publicity material?  Yes  No
- Does workshop helpful for your College/Curriculum?  Yes  No
- Was material presented in an organized manner?  Yes  No
- Was an instructor knowledgeable on LMS MOODLE?  Yes  No
- As per the title, was this workshop:  a. Too short  b. Right length  c. Too long
- In your opinion, was this workshop:  a. Introductory  b. Intermediate  c. Advanced
- Please rate the following:

	Excellent	Very Good	Good	Fair	Poor
a. Visuals	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Acoustics	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Hospitality/Food	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. The program overall	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- What did you most appreciate/enjoy/think was best about the workshop? Any suggestions for improvement?  
\_\_\_\_\_  
\_\_\_\_\_

Thank you!

Please return this form to the instructor or coordinator at the end of the workshop.

Signature of Participant:

“ ज्ञान, विज्ञान आणि सुसंस्कार यांसाठी शिक्षण प्रसार ”

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Shri. Swami Vivekananda Shikshan Sanstha, Kolhapur's  
**Vivekanand College, Kolhapur (Autonomous)**

**Workshop on**

**“Blended Learning with LMS Moodle”**

**under lead College Scheme, Shivaji University, Kolhapur**

**Organized by**

**Department of Computer Science**

Date: 21<sup>st</sup> Mar 2022, Time: 09:30 am to 5:00 pm

Venue: Room No.14/Lab

### Feedback Form

Your feedback is critical for our college to ensure we are meeting your educational needs. We would appreciate if you could take a few minutes to share your opinions with us so we can serve you better.

Name of Participant: Dr. Jyoti M. Gore Class/College: vivekanand college, Kolhapur

1. Does workshop fulfilled your expectations?  Yes  No
2. Whether the content was as described in publicity material?  Yes  No
3. Does workshop helpful for your College/Curriculum?  Yes  No
4. Was material presented in an organized manner?  Yes  No
5. Was an instructor knowledgeable on LMS MOODLE?  Yes  No
6. As per the title, was this workshop:  a. Too short  b. Right length  c. Too long
7. In your opinion, was this workshop:  a. Introductory  b. Intermediate  c. Advanced

8. Please rate the following:

	Excellent	Very Good	Good	Fair	Poor
a. Visuals	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Acoustics	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Hospitality/Food	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. The program overall	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. What did you most appreciate/enjoy/think was best about the workshop? Any suggestions for improvement?

Blended learning with LMS Moodle is very helpful for us. arrange such workshop regularly.

Thank you!

Please return this form to the instructor or coordinator at the end of the workshop.

Signature of Participant: [Signature]

“ ज्ञान, विज्ञान आणि सुसंस्कार यांसाठी शिक्षण प्रसार ”

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**Vivekanand College, Kolhapur (Autonomous)**

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**Department of Computer Science**

Date: 21<sup>st</sup> Mar 2022, Time: 09:30 am to 5:00 pm

Venue: Room No.14/Lab

### Feedback Form

Your feedback is critical for our college to ensure we are meeting your educational needs. We would appreciate if you could take a few minutes to share your opinions with us so we can serve you better.

Name of Participant: Miss Pratiksh . P. More Class/College: The New college . kol

1. Does workshop fulfilled your expectations?  Yes  No
2. Whether the content was as described in publicity material?  Yes  No
3. Does workshop helpful for your College/Curriculum?  Yes  No
4. Was material presented in an organized manner?  Yes  No
5. Was an instructor knowledgeable on LMS MOODLE?  Yes  No

6. As per the title, was this workshop:  a. Too short  b. Right length  c. Too long

7. In your opinion, was this workshop:  a. Introductory  b. Intermediate  c. Advanced

8. Please rate the following:

	Excellent	Very Good	Good	Fair	Poor
a. Visuals	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Acoustics	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Hospitality/Food	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. The program overall	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. What did you most appreciate/enjoy/think was best about the workshop? Any suggestions for improvement?

The workshop is very knowledgeable & Advanced.

**Thank you!**

Please return this form to the instructor or coordinator at the end of the workshop.

Signature of Participant:

“ ज्ञान, विज्ञान आणि सुसंस्कार यांसाठी शिक्षण प्रसार ”

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**Vivekanand College, Kolhapur (Autonomous)**

Workshop on

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under lead College Scheme, Shivaji University, Kolhapur

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**Department of Computer Science**

Date: 21<sup>st</sup> Mar 2022, Time: 09:30 am to 5:00 pm

Venue: Room No.14/Lab

### Feedback Form

Your feedback is critical for our college to ensure we are meeting your educational needs. We would appreciate if you could take a few minutes to share your opinions with us so we can serve you better.

Name of Participant: Narayani R. Sarnaik Class/College: Gokhale Collage.

- Does workshop fulfilled your expectations?  Yes  No
- Whether the content was as described in publicity material?  Yes  No
- Does workshop helpful for your College/Curriculum?  Yes  No
- Was material presented in an organized manner?  Yes  No
- Was an instructor knowledgeable on LMS MOODLE?  Yes  No
- As per the title, was this workshop:  a. Too short  b. Right length  c. Too long
- In your opinion, was this workshop:  a. Introductory  b. Intermediate  c. Advanced
- Please rate the following:

	Excellent	Very Good	Good	Fair	Poor
a. Visuals	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Acoustics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Hospitality/Food	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. The program overall	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
- What did you most appreciate/enjoy/think was best about the workshop? Any suggestions for improvement?

overall it was good and informative but it  
too ~~is~~ way long to explain practical part which was  
pretty basic.

Thank you!

Please return this form to the instructor or coordinator at the end of the workshop.

Signature of Participant:

“ ज्ञान, विज्ञान आणि सुसंस्कार यांसाठी शिक्षण प्रसार ”

-शिक्षणमहर्षी डॉ. बापूजी साळुंखे

Shri. Swami Vivekananda Shikshan Sanstha, Kolhapur's  
**Vivekanand College, Kolhapur (Autonomous)**

Workshop on

“Blended Learning with LMS Moodle”

under lead College Scheme, Shivaji University, Kolhapur

Organized by

**Department of Computer Science**

Date: 21<sup>st</sup> Mar 2022, Time: 09:30 am to 5:00 pm

Venue: Room No.14/Lab

### Feedback Form

Your feedback is critical for our college to ensure we are meeting your educational needs. We would appreciate if you could take a few minutes to share your opinions with us so we can serve you better.

Name of Participant: Smt. Shinde Snehal Class/College: The New college, Kop

- Does workshop fulfilled your expectations?  Yes  No
- Whether the content was as described in publicity material?  Yes  No
- Does workshop helpful for your College/Curriculum?  Yes  No
- Was material presented in an organized manner?  Yes  No
- Was an instructor knowledgeable on LMS MOODLE?  Yes  No
- As per the title, was this workshop:  a. Too short  b. Right length  c. Too long
- In your opinion, was this workshop:  a. Introductory  b. Intermediate  c. Advanced
- Please rate the following:

	Excellent	Very Good	Good	Fair	Poor
a. Visuals	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Acoustics	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Hospitality/Food	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. The program overall	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- What did you most appreciate/enjoy/think was best about the workshop? Any suggestions for improvement?

This workshop will be very helpful  
for us.

Thank you!

Please return this form to the instructor or coordinator at the end of the workshop.

Shinde  
Signature of Participant:

“ ज्ञान, विज्ञान आणि सुसंस्कार यांसाठी शिक्षण प्रसार ”

-शिक्षणमहर्षी डॉ. बापूजी साळुंखे

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**“Blended Learning with LMS Moodle”**  
under lead College Scheme, Shivaji University, Kolhapur  
Organized by  
**Department of Computer Science**

Date: 21<sup>st</sup> Mar 2022, Time: 09:30 am to 5:00 pm

Venue: Room No.14/Lab

### Feedback Form

Your feedback is critical for our college to ensure we are meeting your educational needs. We would appreciate if you could take a few minutes to share your opinions with us so we can serve you better.

Name of Participant: Mestri Rima Ram Class/College: Mahavir College, kop.

- Does workshop fulfilled your expectations?  Yes  No
- Whether the content was as described in publicity material?  Yes  No
- Does workshop helpful for your College/Curriculum?  Yes  No
- Was material presented in an organized manner?  Yes  No
- Was an instructor knowledgeable on LMS MOODLE?  Yes  No
- As per the title, was this workshop:  a. Too short  b. Right length  c. Too long
- In your opinion, was this workshop:  a. Introductory  b. Intermediate  c. Advanced
- Please rate the following:

	Excellent	Very Good	Good	Fair	Poor
a. Visuals	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Acoustics	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Hospitality/Food	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. The program overall	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- What did you most appreciate/enjoy/think was best about the workshop? Any suggestions for improvement?

\_\_\_\_\_

\_\_\_\_\_

**Thank you!**

Please return this form to the instructor or coordinator at the end of the workshop.

Signature <sup>Retens</sup> of Participant:



“ ज्ञान, विज्ञान आणि सुसंस्कार यांसाठी शिक्षण प्रसार ”

-शिक्षणमहर्षी डॉ. बापूजी साळुंखे

Shri. Swami Vivekananda Shikshan Sanstha, Kolhapur's  
**Vivekanand College, Kolhapur (Autonomous)**

**Workshop on**  
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### Feedback Form

Your feedback is critical for our college to ensure we are meeting your educational needs. We would appreciate if you could take a few minutes to share your opinions with us so we can serve you better.

Name of Participant: Sakshi Sanjay Mahulkar Class/College: Mahavir College Kolhapur

1. Does workshop fulfilled your expectations?  Yes  No
2. Whether the content was as described in publicity material?  Yes  No
3. Does workshop helpful for your College/Curriculum?  Yes  No
4. Was material presented in an organized manner?  Yes  No
5. Was an instructor knowledgeable on LMS MOODLE?  Yes  No

6. As per the title, was this workshop:  a. Too short  b. Right length  c. Too long
7. In your opinion, was this workshop:  a. Introductory  b. Intermediate  c. Advanced

8. Please rate the following:

	Excellent	Very Good	Good	Fair	Poor
a. Visuals	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Acoustics	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Hospitality/Food	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d. The program overall	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. What did you most appreciate/enjoy/think was best about the workshop? Any suggestions for improvement?

\_\_\_\_\_

\_\_\_\_\_

**Thank you!**

Please return this form to the instructor or coordinator at the end of the workshop.

Signature of Participant: Sakshi Mahulkar

“ ज्ञान, विज्ञान आणि सुसंस्कार यांसाठी शिक्षण प्रसार ”

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**Feedback Form**

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Name of Participant: Miss. Maithili S. Kagwade Class/College: Mahavir College, kop

- Does workshop fulfilled your expectations?  Yes  No
- Whether the content was as described in publicity material?  Yes  No
- Does workshop helpful for your College/Curriculum?  Yes  No
- Was material presented in an organized manner?  Yes  No
- Was an instructor knowledgeable on LMS MOODLE?  Yes  No
- As per the title, was this workshop:→  a. Too short  b. Right length  c. Too long
- In your opinion, was this workshop:  a. Introductory  b. Intermediate  c. Advanced
- Please rate the following:

	Excellent	Very Good	Good	Fair	Poor
a. Visuals	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Acoustics	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Hospitality/Food	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. The program overall	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- What did you most appreciate/enjoy/think was best about the workshop? Any suggestions for improvement?

Thanks for this workshop.

Thank you!

Please return this form to the instructor or coordinator at the end of the workshop.

Signature of Participant: M. Kagwade

“ ज्ञान, विज्ञान आणि सुसंस्कार यांसाठी शिक्षण प्रसार ”

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Name of Participant: Arati Naval Rai Class/College: Mahavir college  
(Bsc ty)

- Does workshop fulfilled your expectations?  Yes  No
- Whether the content was as described in publicity material?  Yes  No
- Does workshop helpful for your College/Curriculum?  Yes  No
- Was material presented in an organized manner?  Yes  No
- Was an instructor knowledgeable on LMS MOODLE?  Yes  No
- As per the title, was this workshop:  a. Too short  b. Right length  c. Too long
- In your opinion, was this workshop:  a. Introductory  b. Intermediate  c. Advanced
- Please rate the following:

	Excellent	Very Good	Good	Fair	Poor
a. Visuals	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Acoustics	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Hospitality/Food	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. The program overall	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- What did you most appreciate/enjoy/think was best about the workshop? Any suggestions for improvement?

Thanks for this workshop

**Thank you!**

Please return this form to the instructor or coordinator at the end of the workshop.

Signature of Participant: Rai

“ ज्ञान, विज्ञान आणि सुसंस्कार यांसाठी शिक्षण प्रसार ”

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### Feedback Form

Your feedback is critical for our college to ensure we are meeting your educational needs. We would appreciate if you could take a few minutes to share your opinions with us so we can serve you better.

Name of Participant: Mohini sunil koli Class/College: Bsc III / Mahawie Mahavidyalaya, Kolhapur

- Does workshop fulfilled your expectations?  Yes  No
- Whether the content was as described in publicity material?  Yes  No
- Does workshop helpful for your College/Curriculum?  Yes  No
- Was material presented in an organized manner?  Yes  No
- Was an instructor knowledgeable on LMS MOODLE?  Yes  No
- As per the title, was this workshop:  a. Too short  b. Right length  c. Too long
- In your opinion, was this workshop:  a. Introductory  b. Intermediate  c. Advanced
- Please rate the following:

	Excellent	Very Good	Good	Fair	Poor
a. Visuals	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Acoustics	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Hospitality/Food	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. The program overall	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- What did you most appreciate/enjoy/think was best about the workshop? Any suggestions for improvement?

This workshop is helpful for the knowledge.

Thanks for this workshop

Thank you!

Please return this form to the instructor or coordinator at the end of the workshop.

Signature of Participant: Mohini Koli

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### Feedback Form

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Name of Participant: Dipoli Sanjay Tomgekar Class/College: BCS-III

- Does workshop fulfilled your expectations?  Yes  No
- Whether the content was as described in publicity material?  Yes  No
- Does workshop helpful for your College/Curriculum?  Yes  No
- Was material presented in an organized manner?  Yes  No
- Was an instructor knowledgeable on LMS MOODLE?  Yes  No
- As per the title, was this workshop:  a. Too short  b. Right length  c. Too long
- In your opinion, was this workshop:  a. Introductory  b. Intermediate  c. Advanced
- Please rate the following:

	Excellent	Very Good	Good	Fair	Poor
a. Visuals	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Acoustics	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Hospitality/Food	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. The program overall	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- What did you most appreciate/enjoy/think was best about the workshop? Any suggestions for improvement?

I most appreciate on practical session and i enjoyed it

Thank you!

Please return this form to the instructor or coordinator at the end of the workshop.

Signature of Participant: DS/dm

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-शिक्षणमहर्षी डॉ. बापूजी साळुंखे

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**Department of Computer Science**

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Venue: Room No.14/Lab

### Feedback Form

Your feedback is critical for our college to ensure we are meeting your educational needs. We would appreciate if you could take a few minutes to share your opinions with us so we can serve you better.

Name of Participant: Pragada Khamkar Class/College: BCS-B, RCSC Kolhapur

- Does workshop fulfilled your expectations?  Yes  No
- Whether the content was as described in publicity material?  Yes  No
- Does workshop helpful for your College/Curriculum?  Yes  No
- Was material presented in an organized manner?  Yes  No
- Was an instructor knowledgeable on LMS MOODLE?  Yes  No
- As per the title, was this workshop:  a. Too short  b. Right length  c. Too long
- In your opinion, was this workshop:  a. Introductory  b. Intermediate  c. Advanced
- Please rate the following:

	Excellent	Very Good	Good	Fair	Poor
a. Visuals	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Acoustics	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Hospitality/Food	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. The program overall	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- What did you most appreciate/enjoy/think was best about the workshop? Any suggestions for improvement?

Very valuable session, help me out a lot.

Thank you!

Please return this form to the instructor or coordinator at the end of the workshop.

Signature of Participant: Pragada

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Venue: Room No.14/Lab

**Feedback Form**

Your feedback is critical for our college to ensure we are meeting your educational needs. We would appreciate if you could take a few minutes to share your opinions with us so we can serve you better.

Name of Participant: Balaji . P. Duxtar Class/College: R. C. S. C Kolhapur

1. Does workshop fulfilled your expectations?  Yes  No
2. Whether the content was as described in publicity material?  Yes  No
3. Does workshop helpful for your College/Curriculum?  Yes  No
4. Was material presented in an organized manner?  Yes  No
5. Was an instructor knowledgeable on LMS MOODLE?  Yes  No

6. As per the title, was this workshop:  a. Too short  b. Right length  c. Too long
7. In your opinion, was this workshop:  a. Introductory  b. Intermediate  c. Advanced

8. Please rate the following: -

	Excellent	Very Good	Good	Fair	Poor
a. Visuals	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Acoustics	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Hospitality/Food	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. The program overall	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. What did you most appreciate/enjoy/think was best about the workshop? Any suggestions for improvement?

Very good.

**Thank you!**

Please return this form to the instructor or coordinator at the end of the workshop.

Signature of Participant: Balaji

“ ज्ञान, विज्ञान आणि सुसंस्कार यांसाठी शिक्षण प्रसार ”

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### Feedback Form

Your feedback is critical for our college to ensure we are meeting your educational needs. We would appreciate if you could take a few minutes to share your opinions with us so we can serve you better.

Name of Participant: Navnand Popat Ahirade Class/College: P.C.S.C. Kolhapur

- Does workshop fulfilled your expectations?  Yes  No
- Whether the content was as described in publicity material?  Yes  No
- Does workshop helpful for your College/Curriculum?  Yes  No
- Was material presented in an organized manner?  Yes  No
- Was an instructor knowledgeable on LMS MOODLE?  Yes  No
- As per the title, was this workshop:  a. Too short  b. Right length  c. Too long
- In your opinion, was this workshop:  a. Introductory  b. Intermediate  c. Advanced
- Please rate the following:

	Excellent	Very Good	Good	Fair	Poor
a. Visuals	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Acoustics	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Hospitality/Food	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. The program overall	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- What did you most appreciate/enjoy/think was best about the workshop? Any suggestions for improvement?

Its very good to hear and experiend.

**Thank you!**

Please return this form to the instructor or coordinator at the end of the workshop.

Signature of Participant: N.P. Ahirade.



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Name of Participant: Doyanesh Sutar Class/College: G.K.G. college, Kolhapur

1. Does workshop fulfilled your expectations?  Yes  No
2. Whether the content was as described in publicity material?  Yes  No
3. Does workshop helpful for your College/Curriculum?  Yes  No
4. Was material presented in an organized manner?  Yes  No
5. Was an instructor knowledgeable on LMS MOODLE?  Yes  No

6. As per the title, was this workshop:  a. Too short  b. Right length  c. Too long
7. In your opinion, was this workshop:  a. Introductory  b. Intermediate  c. Advanced

8. Please rate the following:

	Excellent	Very Good	Good	Fair	Poor
a. Visuals	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Acoustics	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Hospitality/Food	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. The program overall	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. What did you most appreciate/enjoy/think was best about the workshop? Any suggestions for improvement?

Everything is good, no any suggestions.

**Thank you!**

Please return this form to the instructor or coordinator at the end of the workshop.

Signature of Participant: D.R. Sutar

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Name of Participant: Akshata Sachin chavan Class/College: G.O.K.G

1. Does workshop fulfilled your expectations?  Yes  No
2. Whether the content was as described in publicity material?  Yes  No
3. Does workshop helpful for your College/Curriculum?  Yes  No
4. Was material presented in an organized manner?  Yes  No
5. Was an instructor knowledgeable on LMS MOODLE?  Yes  No

6. As per the title, was this workshop:  a. Too short  b. Right length  c. Too long
7. In your opinion, was this workshop:  a. Introductory  b. Intermediate  c. Advanced

8. Please rate the following:

	Excellent	Very Good	Good	Fair	Poor
a. Visuals	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Acoustics	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Hospitality/Food	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. The program overall	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. What did you most appreciate/enjoy/think was best about the workshop? Any suggestions for improvement?

\_\_\_\_\_

\_\_\_\_\_

**Thank you!**

Please return this form to the instructor or coordinator at the end of the workshop.

Signature of Participant: Akshata

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**Feedback Form**

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Name of Participant: Saniya Faruk Mujawar Class/College: G.K.G. college

- Does workshop fulfilled your expectations?  Yes  No
- Whether the content was as described in publicity material?  Yes  No
- Does workshop helpful for your College/Curriculum?  Yes  No
- Was material presented in an organized manner?  Yes  No
- Was an instructor knowledgeable on LMS MOODLE?  Yes  No
- As per the title, was this workshop:  a. Too short  b. Right length  c. Too long
- In your opinion, was this workshop:  a. Introductory  b. Intermediate  c. Advanced
- Please rate the following:

	Excellent	Very Good	Good	Fair	Poor
a. Visuals	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Acoustics	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Hospitality/Food	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. The program overall	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- What did you most appreciate/enjoy/think was best about the workshop? Any suggestions for improvement?

\_\_\_\_\_  
\_\_\_\_\_

Thank you!

Please return this form to the instructor or coordinator at the end of the workshop.

Signature of Participant: Saniya Faruk Mujawar

“ ज्ञान, विज्ञान आणि सुसंस्कार यांसाठी शिक्षण प्रसार ”

-शिक्षणमहर्षी डॉ. बापूजी साळुंखे

Shri. Swami Vivekananda Shikshan Sanstha, Kolhapur's  
**Vivekanand College, Kolhapur (Autonomous)**

Workshop on

“Blended Learning with LMS Moodle”

under lead College Scheme, Shivaji University, Kolhapur

Organized by

**Department of Computer Science**

Date: 21<sup>st</sup> Mar 2022, Time: 09:30 am to 5:00 pm

Venue: Room No.14/Lab

### Feedback Form

Your feedback is critical for our college to ensure we are meeting your educational needs. We would appreciate if you could take a few minutes to share your opinions with us so we can serve you better.

Name of Participant: Maskar Sharda Prakash Class/College: S.B.khade koparde

- Does workshop fulfilled your expectations?  Yes  No
- Whether the content was as described in publicity material?  Yes  No
- Does workshop helpful for your College/Curriculum?  Yes  No
- Was material presented in an organized manner?  Yes  No
- Was an instructor knowledgeable on LMS MOODLE?  Yes  No
- As per the title, was this workshop:  a. Too short  b. Right length  c. Too long
- In your opinion, was this workshop:  a. Introductory  b. Intermediate  c. Advanced
- Please rate the following:

	Excellent	Very Good	Good	Fair	Poor
a. Visuals	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Acoustics	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Hospitality/Food	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. The program overall	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- What did you most appreciate/enjoy/think was best about the workshop? Any suggestions for improvement?

Practically done on moodle. gave extra touch to our knowledge.

Thank you!

Please return this form to the instructor or coordinator at the end of the workshop.

Signature of Participant: Sharda

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**Venue: Room No.14/Lab**

### Feedback Form

Your feedback is critical for our college to ensure we are meeting your educational needs. We would appreciate if you could take a few minutes to share your opinions with us so we can serve you better.

Name of Participant: talekar Aparna Ashok Class/College: S.B.Khade koparde Bsc ist

- Does workshop fulfilled your expectations?  Yes  No
- Whether the content was as described in publicity material?  Yes  No
- Does workshop helpful for your College/Curriculum?  Yes  No
- Was material presented in an organized manner?  Yes  No
- Was an instructor knowledgeable on LMS MOODLE?  Yes  No
- As per the title, was this workshop:  a. Too short  b. Right length  c. Too long
- In your opinion, was this workshop:  a. Introductory  b. Intermediate  c. Advanced
- Please rate the following:

	Excellent	Very Good	Good	Fair	Poor
a. Visuals	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Acoustics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Hospitality/Food	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. The program overall	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- What did you most appreciate/enjoy/think was best about the workshop? Any suggestions for improvement?

I Enjoy it.

**Thank you!**

Please return this form to the instructor or coordinator at the end of the workshop.

Ashok  
Signature of Participant:

“ ज्ञान, विज्ञान आणि सुसंस्कार यांसाठी शिक्षण प्रसार ”

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Name of Participant: Lavhate Sanika Bajanar Class/College: S.B.Khade Koparde Bsc. 1<sup>st</sup>

- Does workshop fulfilled your expectations?  Yes  No
- Whether the content was as described in publicity material?  Yes  No
- Does workshop helpful for your College/Curriculum?  Yes  No
- Was material presented in an organized manner?  Yes  No
- Was an instructor knowledgeable on LMS MOODLE?  Yes  No
- As per the title, was this workshop:  a. Too short  b. Right length  c. Too long
- In your opinion, was this workshop:  a. Introductory  b. Intermediate  c. Advanced
- Please rate the following:

	Excellent	Very Good	Good	Fair	Poor
a. Visuals	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Acoustics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Hospitality/Food	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. The program overall	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- What did you most appreciate/enjoy/think was best about the workshop? Any suggestions for improvement?

I enjoy it workshop.

**Thank you!**

Please return this form to the instructor or coordinator at the end of the workshop.

Signature of Participant:

“ ज्ञान, विज्ञान आणि सुसंस्कार यांसाठी शिक्षण प्रसार ”

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Name of Participant: Suryawanshi Prunadhati Class/College: S.B.khade. Bsc. I. st.  
Prakash

- Does workshop fulfilled your expectations?  Yes  No
- Whether the content was as described in publicity material?  Yes  No
- Does workshop helpful for your College/Curriculum?  Yes  No
- Was material presented in an organized manner?  Yes  No
- Was an instructor knowledgeable on LMS MOODLE?  Yes  No
- As per the title, was this workshop:  a. Too short  b. Right length  c. Too long
- In your opinion, was this workshop:  a. Introductory  b. Intermediate  c. Advanced
- Please rate the following:

	Excellent	Very Good	Good	Fair	Poor
a. Visuals	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Acoustics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Hospitality/Food	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. The program overall	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- What did you most appreciate/enjoy/think was best about the workshop? Any suggestions for improvement?

I think the workshop is a excellent.

**Thank you!**

Please return this form to the instructor or coordinator at the end of the workshop.

Signature of Participant:

“ ज्ञान, विज्ञान आणि सुसंस्कार यांसाठी शिक्षण प्रसार ”

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### Feedback Form

Your feedback is critical for our college to ensure we are meeting your educational needs. We would appreciate if you could take a few minutes to share your opinions with us so we can serve you better.

Name of Participant: Onkar S. Salokhe Class/College: The New College, Kolhapur

1. Does workshop fulfilled your expectations?  Yes  No
2. Whether the content was as described in publicity material?  Yes  No
3. Does workshop helpful for your College/Curriculum?  Yes  No
4. Was material presented in an organized manner?  Yes  No
5. Was an instructor knowledgeable on LMS MOODLE?  Yes  No
6. As per the title, was this workshop:  a. Too short  b. Right length  c. Too long
7. In your opinion, was this workshop:  a. Introductory  b. Intermediate  c. Advanced
8. Please rate the following:

	Excellent	Very Good	Good	Fair	Poor
a. Visuals	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Acoustics	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Hospitality/Food	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. The program overall	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. What did you most appreciate/enjoy/think was best about the workshop? Any suggestions for improvement?

Overall Workshop is excellent, because I got much knowledge about LMS Moodle.

**Thank you!**

Please return this form to the instructor or coordinator at the end of the workshop.

Signature of Participant: Onkar S. Salokhe



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### Feedback Form

Your feedback is critical for our college to ensure we are meeting your educational needs. We would appreciate if you could take a few minutes to share your opinions with us so we can serve you better.

Name of Participant: Purva Sunil Jadhav Class/College: The New College, Kolhapur

1. Does workshop fulfilled your expectations?  Yes  No
2. Whether the content was as described in publicity material?  Yes  No
3. Does workshop helpful for your College/Curriculum?  Yes  No
4. Was material presented in an organized manner?  Yes  No
5. Was an instructor knowledgeable on LMS MOODLE?  Yes  No

6. As per the title, was this workshop:  a. Too short  b. Right length  c. Too long

7. In your opinion, was this workshop:  a. Introductory  b. Intermediate  c. Advanced

8. Please rate the following:

	Excellent	Very Good	Good	Fair	Poor
a. Visuals	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Acoustics	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Hospitality/Food	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. The program overall	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. What did you most appreciate/enjoy/think was best about the workshop? Any suggestions for improvement?

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**Thank you!**

Please return this form to the instructor or coordinator at the end of the workshop.

Signature of Participant: Purva Jadhav

“ ज्ञान, विज्ञान आणि सुसंस्कार यांसाठी शिक्षण प्रसार ”

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### Feedback Form

Your feedback is critical for our college to ensure we are meeting your educational needs. We would appreciate if you could take a few minutes to share your opinions with us so we can serve you better.

Name of Participant: Nirali Paresh Mamaniya Class/College: The New College, Kolhapur

1. Does workshop fulfilled your expectations?  Yes  No
2. Whether the content was as described in publicity material?  Yes  No
3. Does workshop helpful for your College/Curriculum?  Yes  No
4. Was material presented in an organized manner?  Yes  No
5. Was an instructor knowledgeable on LMS MOODLE?  Yes  No
6. As per the title, was this workshop:  a. Too short  b. Right length  c. Too long
7. In your opinion, was this workshop:  a. Introductory  b. Intermediate  c. Advanced
8. Please rate the following:

	Excellent	Very Good	Good	Fair	Poor
a. Visuals	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Acoustics	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Hospitality/Food	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. The program overall	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. What did you most appreciate/enjoy/think was best about the workshop? Any suggestions for improvement?

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**Thank you!**

Please return this form to the instructor or coordinator at the end of the workshop.

Signature of Participant: Nirali M.