



Vidarbha Youth Welfare Society's  
**PROF RAM MEGHE COLLEGE OF ENGINEERING & MANAGEMENT**  
**INTERNAL QUALITY ASSURANCE CELL**



***Format: IQ-V***  
**Report on Student/Faculty Workshop**  
**(Name of Department / Cell)**

<b>Session:</b>	
<b>Semester:</b>	
<b>Workshop on:</b>	
<b>Date:</b>	
<b>Time:</b>	
<b>Venue:</b>	
<b>Speaker's/Trainer's Name:</b>	
<b>Designation:</b>	
<b>Affiliation:</b>	
<b>Contact No.:</b>	
<b>Email-Id:</b>	
<b>Address:</b>	
<b>Dignitaries:</b>	

**Student/Faculty Details** (for faculty, put total branch wise count):

Branch	I	II	III	IV	V	VI	VII	VIII	Total Count
CE									
CSE									
EE									
EXTC									
Others									
Grand Total									

**Programme Schedule:**

**Day-1**

Session	From	To	Activity
Session-1			
BREAK			
Session-2			

<b>Objectives:</b>	
<b>Outcomes:</b>	
<b>Remarks(if any):</b>	

Co-ordinator  
(Name & Signature)

Head  
(Department/Cell)