ACTIVITY REPORT FORMAT

4 days training programme on laboratory management systems and internal audit

1.	Name of Activity (Title)	4 days training programme on laboratory management systems and internal audit
2.	Type of Activity (FDP/Lecture/Technical/conference etc.)	Offline training programme
3.	Name of department/ Section/ cell conducting the activity	Electrical Engineering Department and Belz Instruments Pvt.ltd
4.	In coordination with (if any)	
5.	Date of conduct	26-08-2021 TO 29-08-2021
6.	Name of Activity Coordinator (s)	Satvinder Singh Assistant Professor Electrical Engg
7.	Amount Spent	Nill
8.	Funding/ grant from (University/ Industry/ UGC/ AICTE/ DST/ TEQIP/ Outside Society/ agency/others (mention)	Not applicable
9.	Target audience	Faculty members of Electrical Engg Department
10.	No. of beneficiaries	03
11.	Name of Outside guests	 Mr.A.k.nehra , Belz Instruments Pvt.ltd. Faridabad
12.	Any other information	Report Enclosed containing details of notices etc
13.	Also attach two/three good quality photographs	

