DME- 30

Feedback format

Department of Manpower and Employment

Program Name:

District :

Division :

Program conducted date/s :

NO	Name	1.G.N.Division 2.Address 3.Tel	1.Business 2.Business started date	Pre training		Post training		
				Monthly net Income (LKR)	Number of employees	Monthly net Income (LKR)	Number of Employees	Maximum of loan installment can be repayable for a month (LKR)
1								
2								
3								
4								
5								
6								
7								
8								
9								