



## EVALUATION FORM (A)

(For Each Evaluator against each innovation at Regional Level)

Date: 1 Feb 2024

### Khulna Region

#### General Information of Innovation/Project:

1.	Name of the innovation/project	:	
2.	ID no. of innovation/project (auto generated after registration)	:	
3.	Name of the participant (s)	:	1. 2. 3.
4.	Name of the Technology/Department	:	
5.	Name of participant's Polytechnic	:	

**Marks Distribution:** Total 100 marks. Divided in the following criteria:

Sl.	Numbering Area	Total Number	Given Number
1.	Innovation (newness, merit, dignity etc.)	25	
2.	Acceptability, accessibility & usefulness	20	
3.	Relevance in our socio-economic context	15	
4.	Social Impact & environment friendliness	15	
5.	Overall presentation	25	
<b>Total=</b>		<b>100</b>	

#### Individual Evaluator:

<b>Name of the Evaluator</b>	
<b>Designation &amp; Organization</b>	
<b>Signature</b>	
<b>Date of Evaluation</b>	



Date: 1 Feb 2024

### Khulna Region

1.	Name of the innovation/project	:	
2.	ID no. of innovation/project (auto generated after registration)	:	
3.	Name of the participant (s)	:	1. 2. 3.
4.	Name of participant's Polytechnic	:	

**Marks Compilation:** Total marks for each evaluator: 100. Number of Evaluator: 5.

Sl.	Name of the Evaluator	Given Number	Remarks
1.			
2.			
3.			
4.			
5.			
<b>Total No.=</b>			< Out of 500
<b>Average No.=</b>			Divided by no. of Evaluators

### **Convener's Endorsement:**

<b>Name of the Convener of the Evaluation Team</b>	
<b>Signature of the Convener</b>	
<b>Date of Compilation of marks</b>	



## Tabulation Sheet (C)

*Regional Level (must be sent to ASSET Project for national competition)*

Date: 1 Feb 2024

### Khulna Region

Sl.	Name of the innovation & ID No.	Name of the Polytechnic	Marks	Position
1.				1 <sup>st</sup>
2.				2 <sup>nd</sup>
3.				3 <sup>rd</sup>
4.				4 <sup>th</sup>
5.				5 <sup>th</sup>
6.				6 <sup>th</sup>
7.				7 <sup>th</sup>
8.				8 <sup>th</sup>
9.				9 <sup>th</sup>
10.				10 <sup>th</sup>
11.				11 <sup>th</sup>
12.				12 <sup>th</sup>
13.				13 <sup>th</sup>
14.				14 <sup>th</sup>
.....				15 <sup>th</sup>

(N. B. – Please write the information of all participating projects in this form. If necessary, use extra page/s. Please send a copy of this ‘C’ Form to ASSET Project by 01/02/2024).

-----  
Signature of Principal  
of Regional Organizing Institute

-----  
Signature of Convener  
of Evaluation Committee