



DEPARTMENT
AGRONOMY

VSU EXTENSION QUARTERLY REPORT OF ACCOMPLISHMENT FORM

Project Title:

___ 1st Q ___ 2nd Q ___ 3rd Q X 4th Q

MFO 4: Extension Services

Physical Accomplishments

Title of Training/ Seminar/ workshop/ conference/ Activities	Conducted By	Date Conducted	DURATION (# of days)	# of person attended (pls. attached scanned attendance sheet for supporting docs.)	PI 1 : Number of persons trained weighted by length of training (#of person trained x #weight of training) Legend for Weights: < 8 hours 0.50 8 hours (one day) 1.00 2 days 1.25 3-4 days 1.50 5 days or more 2.00	PI 2: Percentage of trainees who rated the training course as good or better (pls. attached evaluation forms) Number of persons who rated the training/seminar services as good or better



DEPARTMENT OF AGRONOMY
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