

# FARMER'S TRAINING

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**Name of the ICS:**

Month: May

Year:

Sr. No.	Date of the Training	Topic of the Training	Name of the resource person of the Training	Name of the Farmer	Signature of the Farmer
1.					

Date:

Place:

Signature with Seal

(ICS Manager)

Month: June

Year:

Sr. No.	Date of the Training	Topic of the Training	Name of the resource person of the Training	Name of the Farmer	Signature of the Farmer
1.					

Date:

Place:

Signature with Seal  
(ICS Manager)

Month: July

Year:

Sr. No.	Date of the Training	Topic of the Training	Name of the resource person of the Training	Name of the Farmer	Signature of the Farmer
1.					

Date:

Place:

Signature with Seal  
(ICS Manager)

Month: August

Year:

Sr. No.	Date of the Training	Topic of the Training	Name of the resource person of the Training	Name of the Farmer	Signature of the Farmer
1.					

Date:

Place:

Signature with Seal  
(ICS Manager)

Month: September

Year:

Sr. No.	Date of the Training	Topic of the Training	Name of the resource person of the Training	Name of the Farmer	Signature of the Farmer
1.					

Date:

Place:

Signature with Seal  
(ICS Manager)

Month: October

Year:

Sr. No.	Date of the Training	Topic of the Training	Name of the resource person of the Training	Name of the Farmer	Signature of the Farmer
1.					

Date:

Place:

Signature with Seal  
(ICS Manager)

Month: November

Year:

Sr. No.	Date of the Training	Topic of the Training	Name of the resource person of the Training	Name of the Farmer	Signature of the Farmer
1.					

Date:

Place:

Signature with Seal  
(ICS Manager)

Month: December

Year:

Sr. No.	Date of the Training	Topic of the Training	Name of the resource person of the Training	Name of the Farmer	Signature of the Farmer
1.					

Date:

Place:

Signature with Seal  
(ICS Manager)



Month: January

Year:

Sr. No.	Date of the Training	Topic of the Training	Name of the resource person of the Training	Name of the Farmer	Signature of the Farmer
1.					

Date:

Place:

Signature with Seal  
(ICS Manager)

Month: February

Year:

Sr. No.	Date of the Training	Topic of the Training	Name of the resource person of the Training	Name of the Farmer	Signature of the Farmer
1.					

Date:

Place:

Signature with Seal  
(ICS Manager)

Month: March

Year:

Sr. No.	Date of the Training	Topic of the Training	Name of the resource person of the Training	Name of the Farmer	Signature of the Farmer
1.					

Date:

Place:

Signature with Seal  
(ICS Manager)

Month: April

Year:

Sr. No.	Date of the Training	Topic of the Training	Name of the resource person of the Training	Name of the Farmer	Signature of the Farmer
1.					

Date:

Place:

Signature with Seal  
(ICS Manager)