APPENDIX - VII

INTERVIEW SCHEDULE TO OBTAIN THE VIEWS OF THE VISUALLY PERSONS ABOUT TRAINING

1) Name .............
   Age (In years) ....... Sex M/F
   Academic Qualification .....

2) Address .................

3) i: Institution from where training was received(with address)
   ii: Affiliation of the Institution
      Government / Non Government/ Voluntary organization

4) Impairment
   a) Degree : Partial/Total
   b) Cause : i: Heredity ii: Congenital iii: Accident iv: Any other

6) Training received from the Institution
   a) Academic b) Music
   c) Poultry d) Farming
   e) Spice grinding e) Book binding
   f) Weaving g) light engineering
   h) Leather work i) Any other

7) Cause for choice of the training program

8) Duration of the training program

9) How did you feel before getting the training?

10) What was the attitude of your family?

11) Did training include daily living skills?

12) Do you feel all training programs should be proper certified and recognized course?
13) Has training improved your social interaction?
14) Did training help you to develop a positive attitude?
15) Has training helped you to raise your self-confidence?
16) Did the Institute have adequate trained staff?
17) How long have you had to wait to get a job?
18) Do you think that the training taken helps for employment?
19) Do you find your training in meeting your present job requirement?
20) How did you get your present job?
21) Would you like to be self-employed?
22) If you do not want to be self-employed what are the factors that discourage you?
23) Are you satisfied with the training that you have taken?
24) Do you have any suggestions for improving the quality of the training program?
25) Any other suggestion.