## List of 'Raters' asked to participate in Multisource Feedback (MSF) or 360 degree assessment

Trainee to	o complete this form		
Trainee's	s name:		
Please fil superviso		ite your MSF forms and the	n return it to your educational
Sr.No	Name of 'Rater'	Profession	Hospital department
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
12			
13			
14			
15			
16			
17			
18			
19			
20			

Dr Mansoor Dilnawaz, Consultant Dermatologist

Dr Zafar Iqbal Shaikh, Advisor in Dermatology