Attendence Sheet Institute Code & Name 050060 VIVEKDEEP SHIKSHAN SANSTHA							
Examination		pril	2020	Date : 28/10/2020	Time : 10 AM		
		-	CHITECT DRAUGH		Time . TO Alv		
Subject :				AND ESTIMATING COST			
Name Of Su							
Enrolment N	lo. Seat No.	Institut	eName Of Stude	nt	Photo	Signature	
1860577771	2004057771	050060	JANGAM SAURAB	SH VISHVANATH	S		
1860577772	2004057772	050060	Kamble Abhijee	T PANDIT	P		
1860577773	2004057773	050060	MARCHANDE VIN	IOD BANDAJI	R		
1860577774	2004057774	050060	NALAVADE ARUN	JANARDAN			
1860577775	2004057775	050060	PARKAR AFFAN H	IUSAINMIYA			
1860577776	2004057776	050060	PARKAR SOBIYA	HUSAINMIYA			
1860577777	2004057777	050060	PATEL KHANSA A	BDULHAMID	9		
1860577778	2004057778	050060	SHINDE SURAJ S	URESH	P		
1860577779	2004057779	050060	Tambe amol an	ANT			
1860577780	2004057780	050060	YADAV VIVEK DE	VANAND			

Total Present No.	Total Absent No.	Total Absent No.	

Supervisor

Notice :

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district

Maharashtra State Board of Skill Development Examinations,Mumbai Attendence Sheet						
Institute Co	ode & Nam	e 050060				
Examinatio			2020 Date : 27/10/2020	Time : 10 AM TO 1 PM		
Course Cod	e & Name	•	CHITECT DRAUGHTSMAN			
Subject :		BUILDING [DRAWING AND CAD PRACTICAL			
Name Of Su	pervisor :					
Enrolment N	lo. Seat No	o. Institut	eName Of Student	Photo Signature		
1860577771	20040577	71 050060	JANGAM SAURABH VISHVANATH			
1860577772	20040577	72 050060	KAMBLE ABHIJEET PANDIT	- Ce		
1860577773	20040577	73 050060	MARCHANDE VINOD BANDAJI			
1860577774	20040577	74 050060	NALAVADE ARUN JANARDAN			
1860577775	20040577	75 050060	PARKAR AFFAN HUSAINMIYA			
1860577776	20040577	76 050060	PARKAR SOBIYA HUSAINMIYA			
1860577777	20040577	77 050060	PATEL KHANSA ABDULHAMID	9		
1860577778	20040577	78 050060	SHINDE SURAJ SURESH			
1860577779	20040577	79 050060	TAMBE AMOL ANANT			
1860577780	20040577	80 050060	YADAV VIVEK DEVANAND			

Total Present No	Total Absent No.	Total Absent No.	

Supervisor

Notice :

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Maharashtra State Board of Skill Development Examinations,Mumbai Attendence Sheet						
Institute Co	ode & Name 050060		N			
Examinatio	n : April	2020 Date : 26/10/2020	Time : 10 AM TO 1 PM			
Course Cod	e & Name : 304401 AF	RCHITECT DRAUGHTSMAN				
Subject :	BUILDING	MATERIAL AND CONSTRUCTION PRACT	ICAL			
Name Of Su	ipervisor :					
Enrolment N	lo. Seat No. Institu	teName Of Student	Photo Signature			
1860577771	2004057771 050060	JANGAM SAURABH VISHVANATH				
1860577772	2004057772 050060	KAMBLE ABHIJEET PANDIT				
1860577773	2004057773 050060	MARCHANDE VINOD BANDAJI				
1860577774	2004057774 050060	NALAVADE ARUN JANARDAN				
1860577775	2004057775 050060	PARKAR AFFAN HUSAINMIYA				
1860577776	2004057776 050060	PARKAR SOBIYA HUSAINMIYA				
1860577777	2004057777 050060	PATEL KHANSA ABDULHAMID				
1860577778	2004057778 050060	SHINDE SURAJ SURESH				
1860577779	2004057779 050060	TAMBE AMOL ANANT				
1860577780	2004057780 050060	YADAV VIVEK DEVANAND				

Total Present No.	Total Absent No.	Total Absent No.	

Notice :

1) Student must check his course, seat no etc before sign.

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office, in prescribe format by exam center In-charge

Maharashtra State Board of Skill Development Examinations,Mumbai Attendence Sheet						
Institute Code & Na	ame 050060		HIKSHAN SANSTHA			
Examination :	April	2020	Date : 23/10/2020	Time : 10 AM TO	1 PM	
Course Code & Nan	ne : 304401 AR	CHITECT DRAUGH	TSMAN			
Subject :	BUSINESS	ECONOMICS PRAC	TICAL			
Name Of Superviso	r:					
Enrolment No. Seat	No. Institut	teName Of Stude	nt	Photo Si	gnature	
1860577771 200405	57771 050060	JANGAM SAURAE	SH VISHVANATH			
1860577772 200405	7772 050060	Kamble Abhijee	T PANDIT	P		
1860577773 200405	7773 050060	MARCHANDE VIN	IOD BANDAJI	8		
1860577774 200405	57774 050060	NALAVADE ARUN	JANARDAN			
1860577775 200405	7775 050060	PARKAR AFFAN H	IUSAINMIYA			
1860577776 200405	7776 050060	PARKAR SOBIYA	HUSAINMIYA			
1860577777 200405	7777 050060	PATEL KHANSA A	BDULHAMID			
1860577778 200405	7778 050060	SHINDE SURAJ S	URESH			
1860577779 200405	7779 050060	TAMBE AMOL AN	ANT			
1860577780 200405	7780 050060	YADAV VIVEK DE	VANAND			

Total Present No.	Total Absent No.	Total Absent No.	

Notice :

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district

office, in prescribe format by exam center In-charge

Maharashtra State Board of Skill Development Examinations,Mumbai Attendence Sheet						
Institute Co	ode & Name 0500	60 VIVEKDEEP SHIKSH	AN SANSTHA			
Examinatio	n : April	2020 Date	e:24/10/2020	Time : 10 AM	TO 1 PM	
Course Cod	e & Name : 30440	ARCHITECT DRAUGHTSMAN	J			
Subject :	COMPL	TER APPLICATION PRACTICA	L			
Name Of Su	ipervisor :					
Enrolment N	lo. Seat No. Ins	ituteName Of Student		Photo	Signature	
1860577771	2004057771 0500	60 JANGAM SAURABH VIS	HVANATH	S.		
1860577772	2004057772 0500	60 KAMBLE ABHIJEET PAN	DIT	P		
1860577773	2004057773 0500	60 MARCHANDE VINOD BA	NDAJI	8		
1860577774	2004057774 0500	60 NALAVADE ARUN JANA	RDAN			
1860577775	2004057775 0500	60 PARKAR AFFAN HUSAIN	IMIYA			
1860577776	2004057776 0500	60 PARKAR SOBIYA HUSAI	NMIYA	Searcon 2004.00		
1860577777	2004057777 0500	60 PATEL KHANSA ABDULI	HAMID	P		
1860577778	2004057778 0500	60 SHINDE SURAJ SURES	1	P		
1860577779	2004057779 0500	60 TAMBE AMOL ANANT				
1860577780	2004057780 0500	60 YADAV VIVEK DEVANAI	ND	R.		

Total Present No.	Total Absent No.	Total Absent No.	

Notice :

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district office, in prescribe formet by even center In charge

office, in prescribe format by exam center In-charge

Maharashtra State Board of Skill Development Examinations,Mumbai Attendence Sheet						
Institute Code & Name 05						
Examination : Apr	ril 2020 D a	ate: 22/10/2020 Tim	ne : 10 AM TO 1 PM			
Course Code & Name : 304	4401 ARCHITECT DRAUGHTSM	AN				
Subject : ENG	GLISH (COMMUNICATION SKIL	L) PRACTICAL				
Name Of Supervisor :						
Enrolment No. Seat No.	InstituteName Of Student		Photo Signature			
1860577771 2004057771 0	050060 JANGAM SAURABH V	ISHVANATH				
1860577772 2004057772 0	050060 KAMBLE ABHIJEET PA	ANDIT	P			
1860577773 2004057773 0	050060 MARCHANDE VINOD	BANDAJI	8			
1860577774 2004057774 0	050060 NALAVADE ARUN JAN	IARDAN				
1860577775 2004057775 0	050060 PARKAR AFFAN HUSA	ΝΝΜΙΥΑ				
1860577776 2004057776 0	050060 PARKAR SOBIYA HUS	SAINMIYA				
1860577777 2004057777 0	050060 PATEL KHANSA ABDU	JLHAMID				
1860577778 2004057778 0	050060 SHINDE SURAJ SURE	SH				
1860577779 2004057779 0	050060 TAMBE AMOL ANANT					
1860577780 2004057780 0	050060 YADAV VIVEK DEVAN	AND				

Total Present No.	Total Absent No.	Total Absent No.	

Supervisor

Notice :

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district

Institute Code & Name 050063RAMRAJE TECHNICAL INSTITUTE AND VOCATIONALExamination :April2020Date : 28/10/2020Time : 10 AM TO 1 PMCourse Code & Name : 304401 ARCHITECT DRAUGHTSMANSubject :ARCHITRCTURAL DRAFTING AND ESTIMATING COSTING PRACTICAL

Name Of Supervisor :

Enrolment No. Seat No. Institute Name Of Student 1860577782 2004057781 050063 WALELE FAIZAN MUKHTAR

1860577783 2004057782 050063 SHIGVAN PRANAV JAGDISH

1860577784 2004057783 050063 PAWAR TEJAS ANIL



Photo

Signature

Total Present No

Notice :

Total Absent No.

Total Absent No.

Supervisor

Exam Center In-Charge

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district

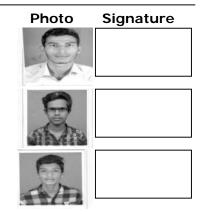
Institute Code & Name 050063 RAMRAJE TECHNICAL INSTITUTE AND VOCATIONAL Examination : April 2020 **Date** : 27/10/2020 Time: 10 AM TO 1 PM Course Code & Name : 304401 ARCHITECT DRAUGHTSMAN Subject : BUILDING DRAWING AND CAD PRACTICAL

Name Of Supervisor :

Enrolment No. Seat No. InstituteName Of Student 1860577782 2004057781 050063 WALELE FAIZAN MUKHTAR

1860577783 2004057782 050063 SHIGVAN PRANAV JAGDISH

1860577784 2004057783 050063 PAWAR TEJAS ANIL



Total Present No.

Notice :

Total Absent No.

Total Absent No.

Supervisor

Exam Center In-Charge

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district

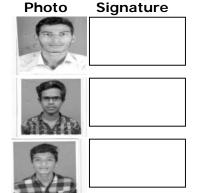
Institute Code & Name 050063 RAMRAJE TECHNICAL INSTITUTE AND VOCATIONAL Examination : April **Date** : 26/10/2020 2020 Time: 10 AM TO 1 PM Course Code & Name : 304401 ARCHITECT DRAUGHTSMAN Subject : BUILDING MATERIAL AND CONSTRUCTION PRACTICAL

Name Of Supervisor :

Enrolment No. Seat No. InstituteName Of Student 1860577782 2004057781 050063 WALELE FAIZAN MUKHTAR

1860577783 2004057782 050063 SHIGVAN PRANAV JAGDISH

1860577784 2004057783 050063 PAWAR TEJAS ANIL



Total Present No.

Notice :

Total Absent No.

Total Absent No.

Supervisor

Exam Center In-Charge

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district

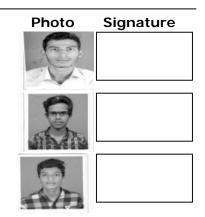
Institute Code & Name 050063 RAMRAJE TECHNICAL INSTITUTE AND VOCATIONAL Examination : April 2020 Date : 24/10/2020 Time: 10 AM TO 1 PM Course Code & Name : 304401 ARCHITECT DRAUGHTSMAN Subject : COMPUTER APPLICATION PRACTICAL

Name Of Supervisor :

Enrolment No. Seat No. InstituteName Of Student 1860577782 2004057781 050063 WALELE FAIZAN MUKHTAR

1860577783 2004057782 050063 SHIGVAN PRANAV JAGDISH

1860577784 2004057783 050063 PAWAR TEJAS ANIL



Total Present No.

Notice :

Total Absent No.

Total Absent No.

Supervisor

Exam Center In-Charge

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district

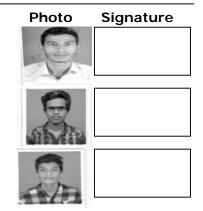
Institute Code & Name 050063 RAMRAJE TECHNICAL INSTITUTE AND VOCATIONAL Examination : April **Date** : 22/10/2020 2020 Time: 10 AM TO 1 PM Course Code & Name : 304401 ARCHITECT DRAUGHTSMAN Subject : ENGLISH (COMMUNICATION SKILL) PRACTICAL

Name Of Supervisor :

Enrolment No. Seat No. InstituteName Of Student 1860577782 2004057781 050063 WALELE FAIZAN MUKHTAR

1860577783 2004057782 050063 SHIGVAN PRANAV JAGDISH

1860577784 2004057783 050063 PAWAR TEJAS ANIL



Total Present No.

Notice :

Total Absent No.

Total Absent No.

Supervisor

Exam Center In-Charge

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district

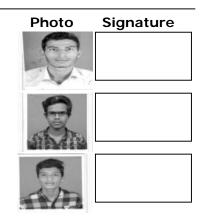
Institute Code & Name 050063 RAMRAJE TECHNICAL INSTITUTE AND VOCATIONAL Examination : April 2020 Date: 23/10/2020 Time: 10 AM TO 1 PM Course Code & Name : 304401 ARCHITECT DRAUGHTSMAN Subject : ENTREPRENEURSHIP PRACTICAL

Name Of Supervisor :

Enrolment No. Seat No. InstituteName Of Student 1860577782 2004057781 050063 WALELE FAIZAN MUKHTAR

1860577783 2004057782 050063 SHIGVAN PRANAV JAGDISH

1860577784 2004057783 050063 PAWAR TEJAS ANIL



Total Present No.

Notice :

Total Absent No.

Total Absent No.

Supervisor

Exam Center In-Charge

1) Student must check his course, seat no etc before sign.

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Maharashtra State	Board of Skill Development Exa Attendence Sheet	aminations,Mumbai
Institute Code & Name 050079		CENTER
Examination : April	2020 Date : 24/10/2020	Time: 10 AM TO 1 PM
Course Code & Name : 410401 F	ASHION DESIGNING & CLOTHING CONST	RUCTION
Subject : COMPUTE	R APPLICATION PRACTICAL	
Name Of Supervisor :		
Enrolment No. Seat No. Institu	IteName Of Student	Photo Signature
1860577813 2004057798 050079	BHARDE SHRUTI RAVINDRA	
1860577814 2004057799 050079	KEMBLE SHRADDHA SANJAY	
1860577815 2004057800 050079	KAVITAKE AKANKSHA JALINDAR	
1860577816 2004057801 050079	KUMBHAR ANKITA DEVDAS	
1860577817 2004057802 050079	MAYEKAR SAYALI ANANT	
1860577818 2004057803 050079	PADAVE KIRTI BHARAT	
1860577819 2004057804 050079	PEVEKAR IQRA ZULFI	
1860577820 2004057805 050079	VARANKAR POOJA DEEPAK	
1860577821 2004057806 050079	RATHOD SHRIDEVI BHILU	
1760577807 2004057859 050079	KUDALKAR KASTURI NITIN	

Total Present No	Total	Absent No.	Total Absent No.	

Supervisor

Notice :

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district

Ma	aharashtra State	Board of Skill Deve Attendence She		minations,M	umbai
Institute Co	ode & Name 050079			ENTER	
Examinatio	n: April	2020 Dat	e :22/10/2020	Time : 10 AM	TO 1 PM
Course Cod	e & Name : 410401 FA	SHION DESIGNING & CL	OTHING CONSTR	UCTION	
Subject :	ENGLISH (COMMUNICATION SKILL) PRACTICAL		
Name Of Su	ipervisor :				
Enrolment N	lo. Seat No. Institut	eName Of Student		Photo	Signature
1860577813	2004057798 050079	BHARDE SHRUTI RAVI	NDRA	9	
1860577814	2004057799 050079	KEMBLE SHRADDHA SA	ANJAY	R	
1860577815	2004057800 050079	KAVITAKE AKANKSHA	JALINDAR		
1860577816	2004057801 050079	KUMBHAR ANKITA DEV	/DAS	2	
1860577817	2004057802 050079	MAYEKAR SAYALI ANA	NT	R	
1860577818	2004057803 050079	PADAVE KIRTI BHARAT	-		
1860577819	2004057804 050079	PEVEKAR IQRA ZULFI			
1860577820	2004057805 050079	VARANKAR POOJA DEE	РАК		
1860577821	2004057806 050079	RATHOD SHRIDEVI BH	ILU		
1760577807	2004057859 050079	KUDALKAR KASTURI N	ITIN	2	

Total Present No	Total Absent N	o	Total Absent No.	

Notice :

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district

office, in prescribe format by exam center In-charge

Maharashtra State	e Board of Skill Development Ex Attendence Sheet	aminations,Mumbai
Institute Code & Name 050079		CENTER
Examination : April	2020 Date : 23/10/2020	Time: 10 AM TO 1 PM
Course Code & Name : 410401 F	FASHION DESIGNING & CLOTHING CONST	RUCTION
Subject : ENTREPR	RENEURSHIP PRACTICAL	
Name Of Supervisor :		
Enrolment No. Seat No. Instit	uteName Of Student	Photo Signature
1860577813 2004057798 05007	9 BHARDE SHRUTI RAVINDRA	
1860577814 2004057799 05007	9 KEMBLE SHRADDHA SANJAY	
1860577815 2004057800 05007	9 KAVITAKE AKANKSHA JALINDAR	
1860577816 2004057801 05007	9 KUMBHAR ANKITA DEVDAS	
1860577817 2004057802 05007	9 MAYEKAR SAYALI ANANT	
1860577818 2004057803 05007	9 PADAVE KIRTI BHARAT	
1860577819 2004057804 05007	9 PEVEKAR IQRA ZULFI	
1860577820 2004057805 05007	9 VARANKAR POOJA DEEPAK	
1860577821 2004057806 05007	9 RATHOD SHRIDEVI BHILU	
1760577807 2004057859 05007	9 KUDALKAR KASTURI NITIN	

Total Present No.	Total Absent No.	Total Absent No.	

Notice :

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district

office, in prescribe format by exam center In-charge

Maharashtra State	Board of Skill Development Ex Attendence Sheet	aminations,Mumbai
Institute Code & Name 050079	REAGAL VOCATIONAL TRAINING	CENTER
Examination : April	2020 Date : 28/10/2020	Time : 10 AM TO 1 PM
Course Code & Name : 410401 F/	ASHION DESIGNING & CLOTHING CONST	RUCTION
Subject : FASHION	DESIGNING & ILLUSTRATION PRACTICAL	
Name Of Supervisor :		
Enrolment No. Seat No. Institu	IteName Of Student	Photo Signature
1860577813 2004057798 050079	BHARDE SHRUTI RAVINDRA	
1860577814 2004057799 050079	KEMBLE SHRADDHA SANJAY	
1860577815 2004057800 050079	KAVITAKE AKANKSHA JALINDAR	
1860577816 2004057801 050079	KUMBHAR ANKITA DEVDAS	
1860577817 2004057802 050079	MAYEKAR SAYALI ANANT	
1860577818 2004057803 050079	PADAVE KIRTI BHARAT	
1860577819 2004057804 050079	PEVEKAR IQRA ZULFI	
1860577820 2004057805 050079	VARANKAR POOJA DEEPAK	
1860577821 2004057806 050079	RATHOD SHRIDEVI BHILU	
1760577807 2004057859 050079	KUDALKAR KASTURI NITIN	

Total Present No.	Total Absent No.	Total Absent No.	

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Exam Center In-Charge

Supervisor

Notice :

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2) Any Correction in student information should be immidiatly reported to concerned district

Maharashtra State	Board of Skill Development Exa Attendence Sheet	aminations,Mumbai
Institute Code & Name 050079		ENTER
Examination : April	2020 Date : 27/10/2020	Time: 10 AM TO 1 PM
Course Code & Name : 410401 F	ASHION DESIGNING & CLOTHING CONSTR	RUCTION
Subject : GARMENT	MAKING PRACTICAL	
Name Of Supervisor :		
Enrolment No. Seat No. Institu	uteName Of Student	Photo Signature
1860577813 2004057798 050079	BHARDE SHRUTI RAVINDRA	
1860577814 2004057799 050079	KEMBLE SHRADDHA SANJAY	
1860577815 2004057800 050079	KAVITAKE AKANKSHA JALINDAR	
1860577816 2004057801 050079	KUMBHAR ANKITA DEVDAS	2
1860577817 2004057802 050079	MAYEKAR SAYALI ANANT	
1860577818 2004057803 050079	PADAVE KIRTI BHARAT	
1860577819 2004057804 050079	PEVEKAR IQRA ZULFI	
1860577820 2004057805 050079	VARANKAR POOJA DEEPAK	
1860577821 2004057806 050079	RATHOD SHRIDEVI BHILU	
1760577807 2004057859 050079	KUDALKAR KASTURI NITIN	

Total Present No.	Total Absent No.	Total Absent No.

Supervisor Notice :

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2) Any Correction in student information should be immidiatly reported to concerned district

Mah	arashtra State E	Board of Skill [Attendence		minations,Mumbai
Institute Code	e & Name 050079		FIONAL TRAINING CE	INTER
Examination :	April	2020	Date : 26/10/2020	Time: 10 AM TO 1 PM
Course Code &	& Name : 410401 FAS	SHION DESIGNING	& CLOTHING CONSTRU	JCTION
Subject :	PAPER PATT	ERN MAKING PRA	CTICAL	
Name Of Supe	ervisor :			
Enrolment No.	Seat No. Institute	eName Of Studer	nt	Photo Signature
1860577813 2	004057798 050079	BHARDE SHRUTI	RAVINDRA	
1860577814 2	004057799 050079	KEMBLE SHRADD	HA SANJAY	
1860577815 2	004057800 050079	KAVITAKE AKANK	SHA JALINDAR	
1860577816 2	004057801 050079	KUMBHAR ANKITA	A DEVDAS	
1860577817 2	004057802 050079	MAYEKAR SAYALI	ANANT	R.
1860577818 2	004057803 050079	PADAVE KIRTI BH	ARAT	
1860577819 2	004057804 050079	PEVEKAR IQRA ZU	JLFI	
1860577820 2	004057805 050079	VARANKAR POOJA	A DEEPAK	
1860577821 2	004057806 050079	RATHOD SHRIDE	/I BHILU	
1760577807 2	004057859 050079	KUDALKAR KASTU	JRI NITIN	

Total Present No.	Total Absent No.	Total Absent No	o

and the second second

Exam Center In-Charge

Supervisor Notice :

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district

Maharashtra	State Board of S Attend	skill Developi ence Sheet	ment Examin	ations,Mumb	bai
Institute Code & Name ()			RAINING CENTE	ER	
Examination : Ap	ril 2020	Date : 27	7/10/2020 Ti	me : 10 AM TO 1	PM
Course Code & Name : 41	5401 HOSPITALITY M	IANAGEMENT			
Subject : AC	COMMODATION SER	VICE PRACTICAL			
Name Of Supervisor :					
Enrolment No. Seat No.	InstituteName Of S	Student		Photo Sigi	nature
1860577797 2004057784 (D50079 DAHIVALKA	AR NITESH CHAN	DRAKANT	8	
1860577798 2004057785 (050079 DEVALE PR/	ATHAMESH PRAK	ASH		
1860577799 2004057786 (050079 GAJMAL AS	HISH ASHOK		R	
1860577800 2004057787 (050079 GANDHI NA	YAN ANIL		S	
1860577801 2004057788 (050079 KADAM PRA	AFULLA MAHESH		3	
1860577802 2004057789 (050079 KADVEKAR	ANIS MOHAMME	D RAFEEQUE		
1860577803 2004057790 (050079 KAZI WASII	F FARUKH		-	
1860577804 2004057791 (050079 KHATU VED	ANT DIGAMBAR		9	
1860577805 2004057792 (050079 PEDNEKAR	NEHA PRAVIN			
1860577806 2004057793 (050079 PEVEKAR SI	HUBHAM GANESI	4		
1860577807 2004057794 (050079 PHALANE R	USHABH SUBHAS	БН	E.	
Total Present No	Total Absent N	lo	Total Absent N	lo.	
Supervisor			Exam Ce	nter In-Charge	
) Student must check his court 2) Any Correction in student in		-	ed to concerned d	istrict	
ffice in prescribe format by		infinitionally report			

Examination Course Code Subject :	& Name : 415401 F	REAGAL VOCA 2020	ATIONAL TRAINING CE	INTER				
Course Code Subject :	& Name : 415401 F	2020						
Subject :			Date : 27/10/2020	Time : 10 AM	1 TO 1 PM			
-								
Name Of Sur	ACCUIVIIVI	DDATION SERVICE	PRACTICAL					
Name Of Sup	pervisor :							
nrolment No	o. Seat No. Institu	uteName Of Stude	ent	Photo	Signature			
860577808	2004057795 050079	PIMPALE SUSHA	NT SUDHAKAR	9				
860577809	2004057796 050079	RANE SHUBHAM	LAWOO	9				
860577810	2004057797 050079	9 SATAM TEJAS SA	ANTOSH					
760577813	2004057860 050079	OCHALKE YASH SI	URYAKANT					
760577819	2004057862 050079	9 KHATATE YASH N	MILIND	Ð,				
760577826	2004057863 050079	MOHITE SHRININ	VAS KRUSHNA					
760577830	2004057864 050079	PATIL NISHANT	NANDAKISHOR					
760577832	2004057865 050079	9 SABLE IMTIYAZ	ABDUL RAZZAQUE					
660577816	2004057866 050079	CHILE SUSHANT	SUVAS					
760577817	2004057867 050079) DATE VIRAJ VIJA	¥Υ					
760577820	2004057868 050079	9 KUMBHAR AKSH.	AY SANJAY					
				R. ALLON				

Supervisor Notice :

Exam Center In-Charge

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district

Institute Code & Name 050079 REAGAL VOCATIONAL TRAINING CENTER			NTER		
Examination :	April	2020	Date : 27/10/2020	Time: 10 AM TO 1 PM	
Course Code & Name : 415401 HOSPITALITY MANAGEMENT					
Subject :	ACCOMMODATI	ON SERVICE	PRACTICAL		

Name Of Supervisor :

Enrolment No. Seat No. Institute Name Of Student 1760577833 2004057871 050079 SALVI AADESH RAVINDRA



Total Present No.

Notice :

Total Absent No.

Total Absent No.

Supervisor

Exam Center In-Charge

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district

Maharashtra State Board of Skill Development Examinations,Mumbai Attendence Sheet						
nstitute Code &	Name 0500			AINING CENTEI	R	
Examination :	April	2020	Date : 24/	10/2020 Tin	ne : 10 AM TO	1 PM
Course Code &	Name : 41540 ²	HOSPITALITY MAN	AGEMENT			
Subject :	COMPU	TER APPLICATION P	RACTICAL			
Name Of Superv	/isor :					
		ituteName Of Stud			Photo Si	gnature
860577797 200	4057784 0500	079 DAHIVALKAR N	IITESH CHAND	RAKANT	8	
860577798 200	4057785 0500	79 DEVALE PRATH	IAMESH PRAKA	SH	0	
860577799 200	4057786 0500	79 GAJMAL ASHIS	SH ASHOK	ĺ	2	
860577800 200	4057787 0500	79 GANDHI NAYAI	N ANIL		S.	
860577801 200	4057788 0500	79 KADAM PRAFU	LLA MAHESH		8	
860577802 200	4057789 0500	979 KADVEKAR AN	IS MOHAMMED	RAFEEQUE		
860577803 200	4057790 0500	079 KAZI WASIF FA	ARUKH		Ţ	
860577804 200	4057791 0500	79 KHATU VEDAN	T DIGAMBAR		9	
860577805 200	4057792 0500	79 PEDNEKAR NEH	HA PRAVIN			
860577806 200	4057793 0500	079 PEVEKAR SHUE	BHAM GANESH			
860577807 200	4057794 0500	079 PHALANE RUSH	HABH SUBHASH	4	<u>e</u>	
otal Present N	p.	Total Absent No.		Total Absent No	p	
otice :	ervisor	eat no etc before sign		 Exam Cer	nter In-Charg	e

Institute Co	de & Name 0500	079 REAGAL VO	CATIONAL TRAINING C	ENTER
Examinatio	n : April	2020	Date: 24/10/2020	Time : 10 AM TO 1 PM
Course Code	e & Name : 41540	01 HOSPITALITY MAN	AGEMENT	
Subject :	COMP	UTER APPLICATION P	RACTICAL	
Name Of Su	pervisor :			
Enrolment N	o. Seat No. Ins	stituteName Of Stu	dent	Photo Signature
1860577808	2004057795 050	0079 PIMPALE SUSH	IANT SUDHAKAR	Q
1860577809	2004057796 050	0079 RANE SHUBHA	M LAWOO	
1860577810	2004057797 050	0079 SATAM TEJAS	SANTOSH	
1760577813	2004057860 050	0079 CHALKE YASH	SURYAKANT	
1760577818	2004057861 050	0079 KAMBLE RUSH	IKESH AVINASH	
1760577819	2004057862 050	0079 KHATATE YASH	HMILIND	
1760577830	2004057864 050	0079 PATIL NISHAN	T NANDAKISHOR	
1760577832	2004057865 050	0079 SABLE IMTIYA	Z ABDUL RAZZAQUE	
1760577817	2004057867 050	0079 DATE VIRAJ VI	YAU	
1760577820	2004057868 050	0079 KUMBHAR AKS	HAY SANJAY	
1760577822	2004057869 050	0079 MAHADIK PRAI	NIL PRAKASH	
Total Preser	nt No	Total Absent No.	Total Abse	ent No.

Notice :

Exam Center In-Charge

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district

Institute Code & Name 050079 REAGAL VOCATIONAL TRAINING CENTER			INTER		
Examination :	April	2020	Date : 24/10/2020	Time: 10 AM TO 1 PM	
Course Code & Name : 415401 HOSPITALITY MANAGEMENT					
Subject :	COMPUTER	APPLICATION PRA	CTICAL		

Name Of Supervisor :

Enrolment No. Seat No. InstituteName Of Student 1760577831 2004057870 050079 RATHOD RAKESH RAJU

1760577833 2004057871 050079 SALVI AADESH RAVINDRA



Total Present No.

Notice :

Total Absent No.

Total Absent No.

Supervisor

Exam Center In-Charge

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district

Institute Code & Name 05	0079 REAGAL VOCATIO	NAL TRAINING CENTER	{
Examination : Apri			ne : 10 AM TO 1 PM
•	401 HOSPITALITY MANAGEME		
Subject : ENG	LISH (COMMUNICATION SKIL	L) PRACTICAL	
Name Of Supervisor :			
Inrolment No. Seat No. I			Photo Signature
1860577797 2004057784 0	50079 DAHIVALKAR NITESH	I CHANDRAKANT	
860577798 2004057785 0	50079 DEVALE PRATHAMES	H PRAKASH	
860577799 2004057786 0	50079 GAJMAL ASHISH ASH	IOK	2
860577800 2004057787 0	50079 GANDHI NAYAN ANIL		S.
860577801 2004057788 0	50079 KADAM PRAFULLA M	AHESH	9
1860577802 2004057789 0	50079 KADVEKAR ANIS MO	HAMMED RAFEEQUE	
1860577803 2004057790 0	50079 KAZI WASIF FARUKH		Ţ.
1860577804 2004057791 0	50079 KHATU VEDANT DIG/	AMBAR	9
1860577805 2004057792 0	50079 PEDNEKAR NEHA PR/	AVIN	
1860577806 2004057793 0	50079 PEVEKAR SHUBHAM	GANESH	
1860577807 2004057794 0	50079 PHALANE RUSHABH S	SUBHASH	
Total Present No.	Total Absent No.	Total Absent No)
Supervisor Notice :		Exam Cen	ter In-Charge

Institute Code & Name050079REAGAL VOCATIONAL TRAINING CENTERExamination :April2020Date : 22/10/2020Time : 10 AM TO 1 PMCourse Code & Name : 415401 HOSPITALITY MANAGEMENTENGLISH (COMMUNICATION SKILL) PRACTICAL

Name Of Supervisor :

Enrolment No. Seat No. InstituteName Of Student 1860577808 2004057795 050079 PIMPALE SUSHANT SUDHAKAR

1860577809 2004057796 050079 RANE SHUBHAM LAWOO

1860577810 2004057797 050079 SATAM TEJAS SANTOSH

1760577819 2004057862 050079 KHATATE YASH MILIND

1760577826 2004057863 050079 MOHITE SHRINIVAS KRUSHNA

1760577817 2004057867 050079 DATE VIRAJ VIJAY



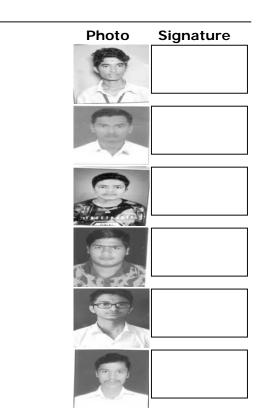
Supervisor

Notice :

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district

office, in prescribe format by exam center In-charge



		Attendence	Sheet	minations,Mumbai
	de & Name 0500		TIONAL TRAINING CE	
Examination		2020	Date: 23/10/2020	Time : 10 AM TO 1 PM
		1 HOSPITALITY MANAG		
Subject :		PRENEURSHIP PRACTIC	AL	
Name Of Su	pervisor :			
		tituteName Of Studer		Photo Signature
1860577797	2004057784 050	D79 DAHIVALKAR NIT	ESH CHANDRAKANT	S.
1860577798	2004057785 050	D79 DEVALE PRATHAM	IESH PRAKASH	
1860577799	2004057786 050	079 GAJMAL ASHISH /	ASHOK	
1860577800	2004057787 050	079 GANDHI NAYAN A	NIL	
1860577801	2004057788 050	079 KADAM PRAFULLA	A MAHESH	e
1860577802	2004057789 050	079 KADVEKAR ANIS	Mohammed Rafeeque	
1860577803	2004057790 050	079 KAZI WASIF FARU	ЈКН	- P
1860577804	2004057791 050	079 KHATU VEDANT D	DIGAMBAR	
1860577805	2004057792 050	D79 PEDNEKAR NEHA	PRAVIN	
1860577806	2004057793 050	D79 PEVEKAR SHUBH	AM GANESH	
1860577807	2004057794 050	079 PHALANE RUSHAE	3H SUBHASH	
Total Preser	nt No.	Total Absent No.	Total Abse	ent No.
	L			
	Supervisor		Exar	n Center In-Charge
Notice :				

2) Any Correction in student information should be immidiatly reported to concerned district office, in prescribe format by exam center In-charge

Institute Co	de & Na	me 050079	Attendence REAGAL VOCA	TIONAL TRAINING CI	ENTER	
Examinatio	n :	April	2020	Date : 23/10/2020	Time : 10 AM	1 TO 1 PM
Course Code	e & Nam	e : 415401 HC	SPITALITY MANAG	SEMENT		
Subject :		ENTREPREM	NEURSHIP PRACTIO	CAL		
Name Of Su	pervisor	:				
Enrolment N	o. Seat	No. Institut	eName Of Stude	nt	Photo	Signature
1860577808	2004057	795 050079	PIMPALE SUSHAN	NT SUDHAKAR	Q	
1860577809	2004057	796 050079	RANE SHUBHAM	LAWOO	Q	
1860577810	2004057	797 050079	SATAM TEJAS SA	NTOSH		
1760577819	2004057	862 050079	KHATATE YASH N	MILIND		
1760577826	2004057	863 050079	MOHITE SHRINI	/AS KRUSHNA		
1760577830	2004057	864 050079	PATIL NISHANT N	NANDAKISHOR	R	
1760577832	2004057	865 050079	SABLE IMTIYAZ A	ABDUL RAZZAQUE		
1660577816	2004057	866 050079	CHILE SUSHANT	SUVAS		
1760577817	2004057	867 050079	DATE VIRAJ VIJA	Y	R	
1760577820	2004057	868 050079	KUMBHAR AKSH	AY SANJAY		
1760577822	2004057	869 050079	MAHADIK PRANII	L PRAKASH		
Total Preser			tal Absent No.	Total Abse		

Notice :

Exam Center In-Charge

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district office, in prescribe format by exam center In-charge

Institute Code & Name 050079 REAGAL VOCATION			ATIONAL TRAINING CE	ENTER	
Examination :	April	2020	Date : 23/10/2020	Time: 10 AM TO 1 PM	
Course Code & Name : 415401 HOSPITALITY MANAGEMENT					
Subject :	ENTREPRENE	URSHIP PRACTI	CAL		

Name Of Supervisor :

Enrolment No. Seat No. Institute Name Of Student 1760577831 2004057870 050079 RATHOD RAKESH RAJU



Total Present No.

Total Absent No.

Total Absent No.

Exam Center In-Charge

Supervisor

Notice :

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district

Maharashtra	State Board of Skill Attendend	l Development Exan ce Sheet	ninations,Mumbai
Institute Code & Name ()	50079 REAGAL VOC	ATIONAL TRAINING CEI	NTER
Examination : Ap	oril 2020	Date : 26/10/2020	Time: 10 AM TO 1 PM
Course Code & Name : 41	5401 HOSPITALITY MANA	GEMENT	
Subject : FO	OD AND BEVERAGE SERV	ICE PRACTICAL	
Name Of Supervisor :			
Enrolment No. Seat No.			Photo Signature
1860577797 2004057784	050079 DAHIVALKAR N	ITESH CHANDRAKANT	8
1860577798 2004057785	050079 DEVALE PRATH	AMESH PRAKASH	
1860577799 2004057786	050079 GAJMAL ASHISI	H ASHOK	
1860577800 2004057787	050079 GANDHI NAYAN	IANIL	- Contraction of the second se
1860577801 2004057788	050079 KADAM PRAFUL	LA MAHESH	P.
1860577802 2004057789	050079 KADVEKAR ANI	S MOHAMMED RAFEEQUE	
1860577803 2004057790	050079 KAZI WASIF FA	RUKH	
1860577804 2004057791	050079 KHATU VEDANT	DIGAMBAR	9
1860577805 2004057792	050079 PEDNEKAR NEH	IA PRAVIN	
1860577806 2004057793	050079 PEVEKAR SHUB	HAM GANESH	
1860577807 2004057794	050079 PHALANE RUSH	ABH SUBHASH	
Total Present No.	Total Absent No.	Total Abser	nt No.
Supervisor Notice :		Exam	Center In-Charge
1) Student must check his cou 2) Any Correction in student i office, in prescribe format by	information should be imm		ed district

Maharashtra State	Board of Skill Development Ex Attendence Sheet	aminations,Mumbai
Institute Code & Name 050079		CENTER
Examination : April	2020 Date : 26/10/2020	Time: 10 AM TO 1 PM
Course Code & Name : 415401 HO	OSPITALITY MANAGEMENT	
Subject : FOOD AND	BEVERAGE SERVICE PRACTICAL	
Name Of Supervisor :		
Enrolment No. Seat No. Institu	teName Of Student	Photo Signature
1860577808 2004057795 050079	PIMPALE SUSHANT SUDHAKAR	
1860577809 2004057796 050079	RANE SHUBHAM LAWOO	P
1860577810 2004057797 050079	SATAM TEJAS SANTOSH	
1760577813 2004057860 050079	CHALKE YASH SURYAKANT	
1760577819 2004057862 050079	KHATATE YASH MILIND	
1760577830 2004057864 050079	PATIL NISHANT NANDAKISHOR	
1760577832 2004057865 050079	SABLE IMTIYAZ ABDUL RAZZAQUE	
1660577816 2004057866 050079	CHILE SUSHANT SUVAS	
1760577817 2004057867 050079	DATE VIRAJ VIJAY	
1760577833 2004057871 050079	SALVI AADESH RAVINDRA	

Total Present No. Total	I Absent No.	Total Absent No.]
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Notice :

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district

office, in prescribe format by exam center In-charge

Manarasht	ra State Board o Atte	of Skill Develop endence Sheet	ment Examina	tions,Mumbai
Institute Code & Name	e 050079 REAG	AL VOCATIONAL T	RAINING CENTER	
Examination :	April 2	2020 Date : 2	8/10/2020 Tim	e :10 AM TO 1 PM
Course Code & Name :	: 415401 HOSPITALIT	Y MANAGEMENT		
Subject :	PRINCIPLES OF MAN	AGEMENT PRACTIC	AL	
Name Of Supervisor :				
nrolment No. Seat No				Photo Signature
860577797 200405778	84 050079 DAHIVA	LKAR NITESH CHAN	IDRAKANT	3
860577798 200405778	85 050079 DEVALE	PRATHAMESH PRA	KASH	
860577799 200405778	86 050079 GAJMAL	ASHISH ASHOK	, I	8
860577800 200405778	87 050079 GANDHI	I NAYAN ANIL		S
860577801 200405778	88 050079 KADAM	PRAFULLA MAHESH		
860577802 200405778	89 050079 KADVEK	AR ANIS MOHAMMI	ED RAFEEQUE	
860577803 200405779	90 050079 KAZI W	ASIF FARUKH		
860577804 200405779	91 050079 KHATU '	VEDANT DIGAMBAR		
860577805 200405779	92 050079 PEDNEK	AR NEHA PRAVIN		
860577806 200405779	93 050079 PEVEKA	R SHUBHAM GANES	6H	
860577807 200405779	94 050079 PHALAN	E RUSHABH SUBHA	SH	S.
Total Present No.	Total Abser	nt No.] Total Absent No	
Supervisor			Exam Cent	er In-Charge

Institute Code & Name 050079 REAGAL VOCATIONAL TRAINING CENTER						
Examination : April 2020 Date : 28/10/2020				Time : 10 AM TO 1 PM		
Course Cod	e & Name	:415401 HC	SPITALITY MANAG	EMENT		
Subject :		PRINCIPLES	5 of managemen	T PRACTICAL		
Name Of Su	pervisor :					
Inrolment N	lo. Seat No	o. Institut	eName Of Stude	nt	Photo	Signature
860577808	20040577	95 050079	PIMPALE SUSHAN	NT SUDHAKAR	9	
1860577809	20040577	96 050079	RANE SHUBHAM	LAWOO	S	
1860577810	20040577	97 050079	SATAM TEJAS SA	NTOSH		
1760577813	20040578	60 050079	CHALKE YASH SU	JRYAKANT		
1760577819	20040578	62 050079	KHATATE YASH N	1 ILIND		
1760577826	20040578	63 050079	MOHITE SHRINIV	AS KRUSHNA		
1760577830	20040578	64 050079	PATIL NISHANT N	VANDAKISHOR	R	
1760577832	20040578	65 050079	SABLE IMTIYAZ A	ABDUL RAZZAQUE		
1660577816	20040578	66 050079	CHILE SUSHANT	SUVAS		
1760577817	20040578	67 050079	DATE VIRAJ VIJA	Y		
1760577820	20040578	68 050079	KUMBHAR AKSHA	AY SANJAY		
					RS	

Notice :

Exam Center In-Charge

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district

Institute Code & Name 050079		REAGAL VOCATIONAL TRAINING CENTER			
Examination :	April	2020	Date : 28/10/2020	Time: 10 AM TO 1 PM	
Course Code & Name : 415401 HOSPITALITY MANAGEMENT					
Subject :	PRINCIPLES	RINCIPLES OF MANAGEMENT PRACTICAL			

Name Of Supervisor :

Enrolment No. Seat No. InstituteName Of Student 1760577822 2004057869 050079 MAHADIK PRANIL PRAKASH

1760577831 2004057870 050079 RATHOD RAKESH RAJU

1760577833 2004057871 050079 SALVI AADESH RAVINDRA





Total Present No.

Notice :

Total Absent No.

Total Absent No.

Supervisor

Exam Center In-Charge

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district

Maharashtra State Board of Skill Development Examinations,Mumbai Attendence Sheet						
Institute Co	de & Name (050084		HIKSHAN SANSTHA	A	
Examinatior	ו: Ap	oril	2020	Date : 27/10/2020	Time : 10 AM	TO 1 PM
Course Code	e & Name : 41	15401 HOS	SPITALITY MANAG	EMENT		
Subject :	AC	CCOMMOD	ATION SERVICE	PRACTICAL		
Name Of Su	pervisor :					
Enrolment N	o. Seat No.	Institute	Name Of Stude	nt	Photo	Signature
1860577823	2004057807	050084	KHATIB HEENA F	AIYAZ	3	
1860577824	2004057808	050084	BORKAR NIHAL N	IOORULAMIN	3	
1860577825	2004057809	050084	ZARAPKAR MITA	SHIRISH		
1860577827	2004057810	050084	MAHATO AMANT	UMESH		
1860577828	2004057811	050084	PATEL BAHLOOL	SHAKEEL		
1860577829	2004057812	050084	SAWANT SWARO	OP HEMANT		
1860577830	2004057813	050084	HODEKAR OWAIS	S A BASIT	- A	
1860577831	2004057814	050084	GAVANKAR SHRI	PAD LAXMIKANT	Q	
1860577832	2004057815	050084	BERDE RAKSHAN	DA PRAMOD		

Total Present No	Total Absent No.	Total Absent No.

Supervisor Notice :

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district office, in prescribe formet by even center In charge

Institute Co	de & Name	050084	Attendence NAVNIRMAN	SHIKSHAN SANSTHA		
Examinatior	ו: ו	April	2020	Date : 24/10/2020	Time : 10 AN	I TO 1 PM
Course Code	e & Name :	415401 HC	SPITALITY MANA	GEMENT		
Subject :	(COMPUTER	APPLICATION PR	ACTICAL		
Name Of Su	pervisor :					
Inrolment N	o. Seat No.	Institut	eName Of Stud	ent	Photo	Signature
860577823	200405780	7 050084	KHATIB HEENA	FAIYAZ	3	
860577824	200405780	8 050084	BORKAR NIHAL	NOORULAMIN	3	
860577825	200405780	9 050084	ZARAPKAR MITA	A SHIRISH		
860577827	200405781	050084	MAHATO AMANI	Γ UMESH	E,	
860577828	200405781	1 050084	PATEL BAHLOOL	_ SHAKEEL		
860577829	200405781	2 050084	SAWANT SWAR	OOP HEMANT	S	
860577830	200405781	3 050084	HODEKAR OWA	IS A BASIT		
860577831	200405781	4 050084	GAVANKAR SHR	RIPAD LAXMIKANT	Q	
860577832	200405781	5 050084	BERDE RAKSHA	NDA PRAMOD	9	

Total Present No	Total Absent No.	Total Absent No.

Supervisor Notice :

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district

Maharashtra State Board of Skill Development Examinations,Mumbai Attendence Sheet						
Institute Co	de & Name (050084		HIKSHAN SANSTHA		
Examinatio	n: A	pril	2020	Date : 22/10/2020	Time : 10 AM	TO 1 PM
Course Code	e & Name : 4	15401 HOS	SPITALITY MANAG	EMENT		
Subject :	EI	NGLISH (C	OMMUNICATION S	SKILL) PRACTICAL		
Name Of Su	pervisor :					
Enrolment N	o. Seat No.	Institute	Name Of Stude	nt	Photo	Signature
1860577823	2004057807	050084	KHATIB HEENA F	AIYAZ	3	
1860577824	2004057808	050084	BORKAR NIHAL N	OORULAMIN	3	
1860577825	2004057809	050084	ZARAPKAR MITA	SHIRISH	R	
1860577827	2004057810	050084	MAHATO AMANT	UMESH		
1860577828	2004057811	050084	PATEL BAHLOOL	SHAKEEL		
1860577829	2004057812	050084	SAWANT SWARO	OP HEMANT		
1860577830	2004057813	050084	HODEKAR OWAIS	S A BASIT		
1860577831	2004057814	050084	GAVANKAR SHRII	PAD LAXMIKANT	Q	
1860577832	2004057815	050084	BERDE RAKSHAN	DA PRAMOD		

Total Present No	Total Absent N	Io. Total Abse	ent No.

Supervisor Notice :

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district office, in prescribe formet by even center In charge

Maharashtra State Board of Skill Development Examinations,Mumbai Attendence Sheet				
Institute Co	de & Name 050084	NAVNIRMAN SHIKSHAN SANS	ТНА	
Examinatio	n : April	2020 Date : 23/10/20	D20 Time : 10 AM TO 1 PM	
Course Code	e & Name : 415401 H0	DSPITALITY MANAGEMENT		
Subject :	ENTREPRE	NEURSHIP PRACTICAL		
Name Of Su	pervisor :			
Enrolment N	o. Seat No. Institu	teName Of Student	Photo Signature	
1860577823	2004057807 050084	KHATIB HEENA FAIYAZ		
1860577824	2004057808 050084	BORKAR NIHAL NOORULAMIN		
1860577825	2004057809 050084	ZARAPKAR MITA SHIRISH		
1860577827	2004057810 050084	MAHATO AMANT UMESH		
1860577828	2004057811 050084	PATEL BAHLOOL SHAKEEL		
1860577829	2004057812 050084	SAWANT SWAROOP HEMANT		
1860577830	2004057813 050084	HODEKAR OWAIS A BASIT		
1860577831	2004057814 050084	GAVANKAR SHRIPAD LAXMIKANT		
1860577832	2004057815 050084	BERDE RAKSHANDA PRAMOD		

Total Present No.	Total Absent No.	Total Absent No.

Supervisor Notice :

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district

Maharashtra State Board of Skill Development Examinations,Mumbai Attendence Sheet				
Institute Code & Name 050084				
Examination : April	2020 Date : 26/10/2020	Time : 10 AM TO 1 PM		
Course Code & Name : 415401 HC	OSPITALITY MANAGEMENT			
Subject : FOOD AND	BEVERAGE SERVICE PRACTICAL			
Name Of Supervisor :				
Enrolment No. Seat No. Institut	teName Of Student	Photo Signature		
1860577823 2004057807 050084	KHATIB HEENA FAIYAZ	3		
1860577824 2004057808 050084	BORKAR NIHAL NOORULAMIN			
1860577825 2004057809 050084	ZARAPKAR MITA SHIRISH			
1860577827 2004057810 050084	MAHATO AMANT UMESH			
1860577828 2004057811 050084	PATEL BAHLOOL SHAKEEL			
1860577829 2004057812 050084	SAWANT SWAROOP HEMANT	NIL COM		
1860577830 2004057813 050084	HODEKAR OWAIS A BASIT			
1860577831 2004057814 050084	GAVANKAR SHRIPAD LAXMIKANT			
1860577832 2004057815 050084	BERDE RAKSHANDA PRAMOD			

Total Present No.	Total Absent No.	Total Absent No.

Supervisor Notice :

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district office, in prescribe formet by even center In charge

Maharashtra State Board of Skill Development Examinations,Mumbai Attendence Sheet				
Institute Code & Name 050084				
Examination : April	2020 Date : 28/10/2020	Time: 10 AM TO 1 PM		
Course Code & Name : 415401 HC	OSPITALITY MANAGEMENT			
Subject : PRINCIPLE	S OF MANAGEMENT PRACTICAL			
Name Of Supervisor :				
Enrolment No. Seat No. Institut	teName Of Student	Photo Signature		
1860577823 2004057807 050084	KHATIB HEENA FAIYAZ	3,		
1860577824 2004057808 050084	BORKAR NIHAL NOORULAMIN			
1860577825 2004057809 050084	ZARAPKAR MITA SHIRISH			
1860577827 2004057810 050084	MAHATO AMANT UMESH			
1860577828 2004057811 050084	PATEL BAHLOOL SHAKEEL			
1860577829 2004057812 050084	SAWANT SWAROOP HEMANT			
1860577830 2004057813 050084	HODEKAR OWAIS A BASIT			
1860577831 2004057814 050084	GAVANKAR SHRIPAD LAXMIKANT			
1860577832 2004057815 050084	BERDE RAKSHANDA PRAMOD			

Total Present No.	Total Absent No.	Total Absent No.	

Supervisor Notice :

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district

Ma	aharashtra State	e Board of Skill Developm Attendence Sheet	ent Examinations,Mumbai
Institute Co	de & Name 050103	3 GURUKUL SHIKSHAN VA S	SANSHODHAN SANSTHA
Examinatio	n : April	2020 Date : 28/2	10/2020 Time : 10 AM TO 1 PM
Course Code	e & Name : 304401 /	ARCHITECT DRAUGHTSMAN	
Subject :	ARCHITR	CTURAL DRAFTING AND ESTIMAT	ING COSTING PRACTICAL
Name Of Su	pervisor :		
Enrolment N	o. Seat No. Instit	uteName Of Student	Photo Signature
1860577833	2004057816 05010	3 AMBRE SMITA SANTOSH	
1860577834	2004057817 05010	3 KHAN JABBAR HASMAT	
1860577835	2004057818 05010	3 RASAL PAVAN VIJAY	S
1860577836	2004057819 05010	3 GHADE AKSHAY SUBHASH	
1860577837	2004057820 05010	3 PAWAR ARATI SANJAY	
1860577838	2004057821 05010	3 KADAM DIPTI SURESH	
1860577839	2004057822 05010	3 SAYYED SIDDIQUE AHMED	
1860577840	2004057823 05010	3 BHUVAD SANKET DILIP	

Total Present No	Total Absent No.	Total Absent No.	

Supervisor Notice :

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district

Ma	aharashtra State	Board of Skill Dev Attendence Sh		ninations,N	lumbai
Institute Co	de & Name 050103	GURUKUL SHIKSHA		HAN SANSTHA	A
Examinatio	n: April	2020 D a	te:27/10/2020	Time : 10 AM	TO 1 PM
Course Code	e & Name : 304401 AR	CHITECT DRAUGHTSMA	N		
Subject :	BUILDING	DRAWING AND CAD PRA	ACTICAL		
Name Of Su	pervisor :				
Enrolment N	lo. Seat No. Institut	eName Of Student		Photo	Signature
1860577833	2004057816 050103	AMBRE SMITA SANTO	SH		
1860577834	2004057817 050103	KHAN JABBAR HASMA	Т		
1860577835	2004057818 050103	RASAL PAVAN VIJAY		Ş	
1860577836	2004057819 050103	GHADE AKSHAY SUBH	ASH	R	
1860577837	2004057820 050103	PAWAR ARATI SANJAY			
1860577838	2004057821 050103	KADAM DIPTI SURESH		9	
1860577839	2004057822 050103	SAYYED SIDDIQUE AH	MED	2	
1860577840	2004057823 050103	BHUVAD SANKET DILI	Р	0	

Total Present No	Total Absent No.	Total Absent No.	

Supervisor

Notice :

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district

office, in prescribe format by exam center In-charge

Exam Center In-Charge

Ma	Maharashtra State Board of Skill Development Examinations,Mumbai Attendence Sheet					
Institute Co	de & Name 050103	GURUKUL SHIKSHAN VA SANSHO	DHAN SANSTHA			
Examinatio	n : April	2020 Date : 26/10/2020	Time: 10 AM TO 1 PM			
Course Code	e & Name : 304401 AR	CHITECT DRAUGHTSMAN				
Subject :	BUILDING	MATERIAL AND CONSTRUCTION PRACTI	CAL			
Name Of Su	pervisor :					
Enrolment N	o. Seat No. Institut	eName Of Student	Photo Signature			
1860577833	2004057816 050103	AMBRE SMITA SANTOSH				
1860577834	2004057817 050103	KHAN JABBAR HASMAT				
1860577835	2004057818 050103	RASAL PAVAN VIJAY	S.			
1860577836	2004057819 050103	GHADE AKSHAY SUBHASH				
1860577837	2004057820 050103	PAWAR ARATI SANJAY				
1860577838	2004057821 050103	KADAM DIPTI SURESH				
1860577839	2004057822 050103	SAYYED SIDDIQUE AHMED				
1860577840	2004057823 050103	BHUVAD SANKET DILIP				

Total Present No.] Total Absent No.	Total Absent No.	

Supervisor

Notice :

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2) Any Correction in student information should be immidiatly reported to concerned district

Ma	aharashtra State	Board of Skil Attendend		minations,Mumbai	
Institute Co	de & Name 050103	GURUKUL SH	IIKSHAN VA SANSHOD	HAN SANSTHA	
Examinatior	n: April	2020	Date : 23/10/2020	Time: 10 AM TO 1 PM	
Course Code	e & Name : 304401 AR	CHITECT DRAUG	HTSMAN		
Subject :	BUSINESS	ECONOMICS PRA	CTICAL		
Name Of Su	pervisor :				
Enrolment N	o. Seat No. Institut	teName Of Stud	ent	Photo Signature	
1860577833	2004057816 050103	AMBRE SMITA S	SANTOSH		
1860577834	2004057817 050103	KHAN JABBAR I	HASMAT		
1860577835	2004057818 050103	RASAL PAVAN \	YIJAY	S	
1860577836	2004057819 050103	GHADE AKSHA	(SUBHASH		
1860577837	2004057820 050103	PAWAR ARATI S	SANJAY	-	٦

1860577838 2004057821 050103 KADAM DIPTI SURESH

1860577839 2004057822 050103 SAYYED SIDDIQUE AHMED

1860577840 2004057823 050103 BHUVAD SANKET DILIP

Total Present No.	Total Absent No.	Total Absent No.

Exam Center In-Charge

Supervisor Notice :

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district

Ma	harashtra State	Board of Skill [Attendence	Development Exa Sheet	minations,M	umbai
Institute Coc	de & Name 050103		SHAN VA SANSHOD	HAN SANSTHA	
Examination	: April	2020	Date : 24/10/2020	Time : 10 AM	TO 1 PM
Course Code	& Name : 304401 AF	CHITECT DRAUGHT	SMAN		
Subject :	COMPUTER	APPLICATION PRA	CTICAL		
Name Of Sup	pervisor :				
Enrolment No	. Seat No. Institu	teName Of Studer	nt	Photo	Signature
1860577833	2004057816 050103	AMBRE SMITA SA	NTOSH		
1860577834	2004057817 050103	Khan Jabbar Ha	SMAT		
1860577835	2004057818 050103	RASAL PAVAN VIJ	AY	S	
1860577836	2004057819 050103	GHADE AKSHAY S	UBHASH	B	
1860577837	2004057820 050103	PAWAR ARATI SA	YAL		
1860577838	2004057821 050103	KADAM DIPTI SUF	RESH	9	
1860577839	2004057822 050103	SAYYED SIDDIQU	E AHMED	9	
1860577840	2004057823 050103	BHUVAD SANKET	DILIP	0	

Total Present No	Total Absent No.	Total Absent No.	

Supervisor Notice :

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district

Ma	aharashtra State	Board of Skill Development E Attendence Sheet	Examinations,Mumbai
Institute Co	ode & Name 050103		IODHAN SANSTHA
Examinatio	n : April	2020 Date : 22/10/202	20 Time : 10 AM TO 1 PM
Course Code	e & Name : 304401 AF	RCHITECT DRAUGHTSMAN	
Subject :	ENGLISH (COMMUNICATION SKILL) PRACTICAL	
Name Of Su	ipervisor :		
Enrolment N	lo. Seat No. Institu	teName Of Student	Photo Signature
1860577833	2004057816 050103	AMBRE SMITA SANTOSH	
1860577834	2004057817 050103	KHAN JABBAR HASMAT	
1860577835	2004057818 050103	RASAL PAVAN VIJAY	
1860577836	2004057819 050103	GHADE AKSHAY SUBHASH	
1860577837	2004057820 050103	PAWAR ARATI SANJAY	
1860577838	2004057821 050103	KADAM DIPTI SURESH	
1860577839	2004057822 050103	SAYYED SIDDIQUE AHMED	
1860577840	2004057823 050103	BHUVAD SANKET DILIP	

Total Present No.	Total Absent No.	Total Absent No.	

Supervisor

Notice :

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Ма	aharashtra State I	Board of Skill Development Attendence Sheet	Examinations,Mumbai
Institute Co	de & Name 050155		G CENTER
Examinatior	n: April	2020 Date : 27/10/20	20 Time : 10 AM TO 1 PM
Course Code	e & Name : 415401 HC	SPITALITY MANAGEMENT	
Subject :	ACCOMMOI	DATION SERVICE PRACTICAL	
Name Of Su	pervisor :		
Enrolment N	o. Seat No. Institut	eName Of Student	Photo Signature
1860577841	2004057824 050155	BAPARDEKAR AKSHAY ANANT	
1860577842	2004057825 050155	BARE PRITESH MANGESH	
1860577843	2004057826 050155	BHARTI PRACHI JITENDRA	
1860577844	2004057827 050155	CHAVAN VAIBHAV RAVIKANT	
1860577845	2004057828 050155	DUDYE ADITYA GOPINATH	
1860577846	2004057829 050155	INDULKAR SAMPADA SUDHIR	
1860577847	2004057830 050155	JADHAV MANALI JAGANNATH	
1860577848	2004057831 050155	KAMBLE MONIKA MOHAN	
1860577849	2004057832 050155	KAMBLE ROHIT RAMESH	
1860577850	2004057833 050155	KAMBLE SAHIL SIDDHARTHA	

1860577851 2004057834 050155 KHANVILKAR SHAM RAMESH

 Total Present No
 Total Absent No.

 Supervisor
 Exam Center In-Charge

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district office, in prescribe format by exam center In-charge

Maharashtra State Board of Skill Development Examinations,Mumbai Attendence Sheet							
Institute Co	de & Name 05	50155	REGAL VOCATI	ONAL TRAI	NING CENTE	R	
Examinatio	n : Apr	il	2020	Date : 27/	10/2020 T	ime : 10 AM	TO 1 PM
Course Code	e & Name : 415	401 HOSP	ITALITY MANAG	EMENT			
Subject :	ACC	COMMODA	TION SERVICE F	PRACTICAL			
Name Of Su	pervisor :						
Enrolment N	o. Seat No. I	nstituteN	lame Of Studer	nt		Photo	Signature
1860577852	2004057835 0	50155 K	ULKARNI HARSH	IAL AVINASH	ł	E	
1860577853	2004057836 0	50155 N	IAIL DIPAK ATMA	ARAM		P	
1860577854	2004057837 0	50155 N	IANCHEKAR TEJA	AS YASHAVA	NT		
1860577855	2004057838 0	50155 N	iapari muhaj a	SHRAF		T.	
1860577856	2004057839 0	50155 P	ADYAR AMIT DA	TTARAM			
1860577857	2004057840 0	50155 P	ANCHAL PRATHA	MESH VILAS	5		
1860577858	2004057841 0	50155 P	ATERE PRASHAN	IT TUKARAM			
1860577859	2004057842 0	50155 P	AWAR MAHESH	RAMCHANDF	2A	R	
1860577860	2004057843 0	50155 S	AWANT SHILPA	SANTOSH		R	
1860577861	2004057844 0	50155 S	HEDEKAR SAND	ESH DATTAR	AM	R	
1860577862	2004057845 0	50155 S	HERKHAN ISMA	L SAYYED A	LI	<u>S</u>	
Total Preser	nt No.	Total	Absent No.		fotal Absent	No.	

Notice :

Exam Center In-Charge

Supervisor

1) Student must check his course, seat no etc before sign.

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Maharashtra State Board of Skill Development Examinations, Mumbai Attendence Sheet

Institute Code & Name 050155 **REGAL VOCATIONAL TRAINING CENTER** Examination : April 2020 **Date** : 27/10/2020 Time: 10 AM TO 1 PM Course Code & Name : 415401 HOSPITALITY MANAGEMENT Subject : ACCOMMODATION SERVICE PRACTICAL

Name Of Supervisor :

Enrolment No. Seat No. InstituteName Of Student 1860577863 2004057846 050155 SHINGARE AMOL RAMCHANDRA

1860577864 2004057847 050155 WAGHATE PRACHI DIPAK



Total Present No.

Notice :

Total Absent No.

Total Absent No.

Supervisor

Exam Center In-Charge

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district

Maharashtra State Board of Skill Development Examinations,Mumbai Attendence Sheet					
Institute Co	ode & Name (050155		TIONAL TRAINING CEN	NTER
Examinatio	n : A	pril	2020		Time : 10 AM TO 1 PM
Course Cod			SPITALITY MANA		
Subject :	С	OMPUTER	APPLICATION PR	ACTICAL	
Name Of Su	pervisor :				
Enrolment N	lo. Seat No.	Institut	eName Of Stude	ent	Photo Signature
1860577841	2004057824	050155	BAPARDEKAR AI	<shay anant<="" td=""><td></td></shay>	
1860577842	2004057825	050155	BARE PRITESH N	MANGESH	
1860577843	2004057826	050155	BHARTI PRACHI	JITENDRA	
1860577844	2004057827	050155	CHAVAN VAIBH	AV RAVIKANT	E.
1860577845	2004057828	050155	DUDYE ADITYA	GOPINATH	
1860577846	2004057829	050155	INDULKAR SAMI	PADA SUDHIR	
1860577847	2004057830	050155	JADHAV MANALI	I JAGANNATH	
1860577848	2004057831	050155	KAMBLE MONIK	a mohan	
1860577849	2004057832	050155	KAMBLE ROHIT	RAMESH	
1860577850	2004057833	050155	KAMBLE SAHIL S	SIDDHARTHA	
1860577851	2004057834	050155	KHANVILKAR SH	IAM RAMESH	

Total Present No.	Total Absent No.	Total Absent No.	

Notice :

1) Student must check his course, seat no etc before sign.

Supervisor

2) Any Correction in student information should be immidiatly reported to concerned district office, in prescribe format by exam center In-charge

Subject : Name Of Sup Enrolment No 1860577852 2 1860577853 2	& Name : 415401 HC COMPUTER	APPLICATION PRA	ACTICAL	Time : 10 AM	1 TO 1 PM
Subject : Name Of Sup Enrolment No 1860577852 2 1860577853 2	COMPUTER ervisor : . Seat No. Institut 2004057835 050155	APPLICATION PRA	ACTICAL	Photo	Signature
Name Of Sup	ervisor : b. Seat No. Institut 2004057835 050155	teName Of Stude KULKARNI HARSI	nt	Photo	Signature
Enrolment No 1860577852	o. Seat No. Institut 2004057835 050155	KULKARNI HARSI		Photo	Signature
1860577852 2 1860577853 2	2004057835 050155	KULKARNI HARSI		Photo	Signature
1860577853 2			HAL AVINASH		
	2004057836 050155	MAIL DIPAK ATM			
1860577854			ARAM	()	
	2004057837 050155	MANCHEKAR TEJ	AS YASHAVANT		
1860577855 2	2004057838 050155	MAPARI MUHAJ A	\SHRAF	E.	~
1860577856 2	2004057839 050155	PADYAR AMIT DA	TTARAM		
1860577857 2	2004057840 050155	PANCHAL PRATH	AMESH VILAS	9	
1860577858 2	2004057841 050155	PATERE PRASHAN	NT TUKARAM		
1860577859 2	2004057842 050155	PAWAR MAHESH	RAMCHANDRA	R	
1860577860 2	2004057843 050155	SAWANT SHILPA	SANTOSH	R	
1860577861 2	2004057844 050155	SHEDEKAR SAND	ESH DATTARAM	R	
1860577862 2	2004057845 050155	SHERKHAN ISMA	IL SAYYED ALI	<u>S</u>	

Supervisor

Notice :

Exam Center In-Charge

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district

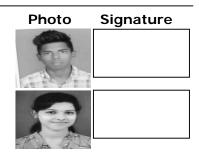
Maharashtra State Board of Skill Development Examinations, Mumbai Attendence Sheet

Institute Code & Nan	ne 050155 RE	GAL VOCAT	IONAL TRAINING CEN	TER
Examination :	April	2020	Date : 24/10/2020	Time: 10 AM TO 1 PM
Course Code & Name : 415401 HOSPITALITY MANAGEMENT				
Subject :	COMPUTER APPL	ICATION PRA	CTICAL	

Name Of Supervisor :

Enrolment No. Seat No. InstituteName Of Student 1860577863 2004057846 050155 SHINGARE AMOL RAMCHANDRA

1860577864 2004057847 050155 WAGHATE PRACHI DIPAK



Total Present No.

Notice :

Total Absent No.

Total Absent No.

Supervisor

Exam Center In-Charge

1) Student must check his course, seat no etc before sign.

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Maharashtra State Board of Skill Development Examinations,Mumbai Attendence Sheet				
Institute Co	ode & Name (050155		INING CENTER
Examinatio			2020 Date : 22/	
	· · · · · · · · · · · · · · · · · · ·	-	SPITALITY MANAGEMENT	
Subject :			OMMUNICATION SKILL) PRAC	TICAL
Name Of Su				
Enrolment N	lo. Seat No.	Institut	eName Of Student	Photo Signature
1860577841	2004057824	050155	BAPARDEKAR AKSHAY ANAN	
1860577842	2004057825	050155	BARE PRITESH MANGESH	
1860577843	2004057826	050155	BHARTI PRACHI JITENDRA	
1860577844	2004057827	050155	CHAVAN VAIBHAV RAVIKANT	
1860577845	2004057828	050155	DUDYE ADITYA GOPINATH	
1860577846	2004057829	050155	INDULKAR SAMPADA SUDHIR	
1860577847	2004057830	050155	JADHAV MANALI JAGANNATH	
1860577848	2004057831	050155	KAMBLE MONIKA MOHAN	
1860577849	2004057832	050155	KAMBLE ROHIT RAMESH	
1860577850	2004057833	050155	KAMBLE SAHIL SIDDHARTHA	
1860577851	2004057834	050155	KHANVILKAR SHAM RAMESH	

Total Present No.	Total Absent No.	Total Absent No.
Supervisor		Exam Center In-Charge

Notice :

1) Student must check his course, seat no etc before sign.

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Maharashtra State Board of Skill Development Examinations,Mumbai Attendence Sheet				
Institute Code & Name 050155		INING CENTER		
		(10/2020 Time : 10 AM T	O 1 PM	
Course Code & Name : 415401 HC				
	COMMUNICATION SKILL) PRAC	TICAL		
Name Of Supervisor :				
Enrolment No. Seat No. Institu	ta Nama Of Studant	Photo S	Signatura	
1860577852 2004057835 050155			Signature	
1860577853 2004057836 050155	MAIL DIPAK ATMARAM			
1860577854 2004057837 050155	MANCHEKAR TEJAS YASHAVA	NT		
1860577855 2004057838 050155	MAPARI MUHAJ ASHRAF	E.		
1860577856 2004057839 050155	PADYAR AMIT DATTARAM			
1860577857 2004057840 050155	PANCHAL PRATHAMESH VILA	s		
1860577858 2004057841 050155	PATERE PRASHANT TUKARAM			
1860577859 2004057842 050155	PAWAR MAHESH RAMCHAND	RA		
1860577860 2004057843 050155	SAWANT SHILPA SANTOSH	R		
1860577861 2004057844 050155	SHEDEKAR SANDESH DATTAF	RAM		
1860577862 2004057845 050155	SHERKHAN ISMAIL SAYYED A			
Total Present No. To	tal Absent No.	Total Absent No.		

Supervisor

Notice :

Exam Center In-Charge

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district

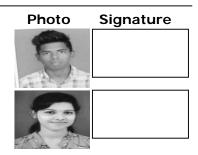
Maharashtra State Board of Skill Development Examinations, Mumbai Attendence Sheet

Institute Code & Name 050155 **REGAL VOCATIONAL TRAINING CENTER** Examination : April 2020 Date : 22/10/2020 Time: 10 AM TO 1 PM Course Code & Name : 415401 HOSPITALITY MANAGEMENT Subject : ENGLISH (COMMUNICATION SKILL) PRACTICAL

Name Of Supervisor :

Enrolment No. Seat No. InstituteName Of Student 1860577863 2004057846 050155 SHINGARE AMOL RAMCHANDRA

1860577864 2004057847 050155 WAGHATE PRACHI DIPAK



Total Present No.

Notice :

Total Absent No.

Total Absent No.

Exam Center In-Charge

Supervisor

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district

Maharashtra State Board of Skill Development Examinations,Mumbai Attendence Sheet						
Institute Co	de & Name (050155		IONAL TRAINING CEI	NTER	
Examination	n: A	pril	2020	Date : 23/10/2020	Time : 10 AM	TO 1 PM
Course Code	& Name :4	15401 HO	SPITALITY MANAG	SEMENT		
Subject :	EI	NTREPREN	EURSHIP PRACTIO	CAL		
Name Of Su	pervisor :					
Enrolment No	o. Seat No.	Institut	eName Of Stude	nt	Photo	Signature
1860577841	2004057824	050155	BAPARDEKAR AK	SHAY ANANT	Q	
1860577842	2004057825	050155	BARE PRITESH M	ANGESH	S	
1860577843	2004057826	050155	BHARTI PRACHI .	JITENDRA		
1860577844	2004057827	050155	CHAVAN VAIBHA	V RAVIKANT	Ð	
1860577845	2004057828	050155	DUDYE ADITYA G	GOPINATH		
1860577846	2004057829	050155	Indulkar samp	ADA SUDHIR		
1860577847	2004057830	050155	JADHAV MANALI	JAGANNATH		
1860577848	2004057831	050155	KAMBLE MONIKA	MOHAN		
1860577849	2004057832	050155	KAMBLE ROHIT R	AMESH		
1860577850	2004057833	050155	KAMBLE SAHIL S	IDDHARTHA		

1860577851 2004057834 050155 KHANVILKAR SHAM RAMESH

 Total Present No.
 Total Absent No.

 Supervisor
 Exam Center In-Charge

Notice :

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Maharashtra State Board of Skill Development Examinations,Mumbai Attendence Sheet					
Institute Code & Name 050	I55 REGAL VOC	ATIONAL TRAINING CEI	NTER		
Examination : April	2020	Date : 23/10/2020	Time: 10 AM TO 1 PM		
Course Code & Name : 4154	1 HOSPITALITY MAN	IAGEMENT			
Subject : ENTR	PRENEURSHIP PRAC	CTICAL			
Name Of Supervisor :					
Enrolment No. Seat No. In	tituteName Of Stu	Ident	Photo Signature		
1860577852 2004057835 050	155 KULKARNI HA	RSHAL AVINASH			
1860577853 2004057836 050	155 MAIL DIPAK A	TMARAM			
1860577854 2004057837 050	155 MANCHEKAR	TEJAS YASHAVANT			
1860577855 2004057838 050	155 MAPARI MUHA	AJ ASHRAF	.		
1860577856 2004057839 050	155 PADYAR AMIT	DATTARAM			
1860577857 2004057840 050	155 PANCHAL PRA	THAMESH VILAS			
1860577858 2004057841 050	155 PATERE PRAS	HANT TUKARAM			
1860577859 2004057842 050	155 PAWAR MAHE	SH RAMCHANDRA			
1860577860 2004057843 050	155 SAWANT SHIL	PA SANTOSH			
1860577861 2004057844 050	155 SHEDEKAR SA	ANDESH DATTARAM			
1860577862 2004057845 050	155 SHERKHAN IS	MAIL SAYYED ALI			
Total Present No	Total Absent No.	. Total Abse	ent No.		

Exam Center In-Charge

1) Student must check his course, seat no etc before sign.

Supervisor

Notice :

2) Any Correction in student information should be immidiatly reported to concerned district office, in prescribe format by exam center In-charge

Maharashtra State Board of Skill Development Examinations, Mumbai Attendence Sheet

Institute Code & Name 050155REGAL VOCATIONAL TRAINING CENTERExamination :April2020Date : 23/10/2020Time : 10 AM TO 1 PMCourse Code & Name : 415401 HOSPITALITY MANAGEMENTENTREPRENEURSHIP PRACTICALENTREPRENEURSHIP PRACTICAL

Name Of Supervisor :

Enrolment No. Seat No. InstituteName Of Student 1860577863 2004057846 050155 SHINGARE AMOL RAMCHANDRA

1860577864 2004057847 050155 WAGHATE PRACHI DIPAK



Total Present No

Notice :

Total Absent No.

Total Absent No.

Exam Center In-Charge

Supervisor

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district

Maharashtra State Board of Skill Development Examinations,Mumbai Attendence Sheet					
Institute Co	de & Name 050155		NTER		
Examinatio	n: April	2020 Date : 26/10/2020	Time : 10 AM TO 1 PM		
Course Cod	e & Name : 415401 H	OSPITALITY MANAGEMENT			
Subject :	FOOD AND	BEVERAGE SERVICE PRACTICAL			
Name Of Su	pervisor :				
Enrolment N	lo. Seat No. Institu	teName Of Student	Photo Signature		
1860577841	2004057824 050155	BAPARDEKAR AKSHAY ANANT			
1860577842	2004057825 050155	BARE PRITESH MANGESH			
1860577843	2004057826 050155	BHARTI PRACHI JITENDRA			
1860577844	2004057827 050155	CHAVAN VAIBHAV RAVIKANT			
1860577845	2004057828 050155	DUDYE ADITYA GOPINATH			
1860577846	2004057829 050155	INDULKAR SAMPADA SUDHIR			
1860577847	2004057830 050155	JADHAV MANALI JAGANNATH			
1860577848	2004057831 050155	KAMBLE MONIKA MOHAN			
1860577849	2004057832 050155	KAMBLE ROHIT RAMESH			
1860577850	2004057833 050155	KAMBLE SAHIL SIDDHARTHA			
1860577851	2004057834 050155	KHANVILKAR SHAM RAMESH			

Total Present No.	Total Absent No.	Total Absent No.	
Supervisor		Exam Center In-Charge	

Notice :

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district office, in prescribe format by exam center In-charge

	ode & Nan	ne 050155	REGAL VOCA	FIONAL TRAINING CEN	NTER	
Examinatio	n :	April	2020	Date : 26/10/2020	Time : 10 AM	1 TO 1 PM
Course Cod	e & Name	:415401 HC	SPITALITY MANA	GEMENT		
Subject :		FOOD AND	BEVERAGE SERV	ICE PRACTICAL		
Name Of Su	upervisor	:				
Enrolment N	lo. Seat N	o. Institu	teName Of Stude	ent	Photo	Signature
1860577852	20040578	335 050155	KULKARNI HARS	SHAL AVINASH	S	
1860577853	20040578	336 050155	MAIL DIPAK ATN	/ARAM	()	
1860577854	20040578	337 050155	MANCHEKAR TE	JAS YASHAVANT		
1860577855	20040578	338 050155	Mapari Muhaj	ASHRAF	. E	
1860577856	20040578	339 050155	PADYAR AMIT D	ATTARAM	S	
1860577857	20040578	340 050155	PANCHAL PRATH	IAMESH VILAS	3	
1860577858	20040578	341 050155	PATERE PRASHA	NT TUKARAM		
1860577859	20040578	342 050155	PAWAR MAHESH	I RAMCHANDRA	R	
1860577860	20040578	343 050155	SAWANT SHILPA	A SANTOSH	R	
1860577861	20040578	344 050155	SHEDEKAR SAN	DESH DATTARAM	S	
1860577862	20040578	345 050155	SHERKHAN ISM/	AIL SAYYED ALI	S	

Supervisor

Notice :

Exam Center In-Charge

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district office, in prescribe format by exam center In-charge

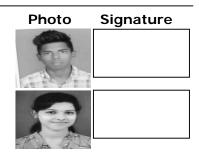
Maharashtra State Board of Skill Development Examinations, Mumbai Attendence Sheet

Institute Code & Name 050155 **REGAL VOCATIONAL TRAINING CENTER** Examination : April 2020 **Date** : 26/10/2020 Time: 10 AM TO 1 PM Course Code & Name : 415401 HOSPITALITY MANAGEMENT Subject : FOOD AND BEVERAGE SERVICE PRACTICAL

Name Of Supervisor :

Enrolment No. Seat No. InstituteName Of Student 1860577863 2004057846 050155 SHINGARE AMOL RAMCHANDRA

1860577864 2004057847 050155 WAGHATE PRACHI DIPAK



Total Present No.

Notice :

Total Absent No.

Total Absent No.

Supervisor

Exam Center In-Charge

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district

Maharashtra State Board of Skill Development Examinations,Mumbai Attendence Sheet					
Institute Co	ode & Name	050155		IONAL TRAINING CEN	ITER
Examinatio	n: /	April	2020	Date : 28/10/2020	Time : 10 AM TO 1 PM
Course Cod	e & Name : 4	415401 HO	SPITALITY MANAG	EMENT	
Subject :	F	RINCIPLES	OF MANAGEMENT	F PRACTICAL	
Name Of Su	pervisor :				
Enrolment N	lo. Seat No.	Institut	eName Of Stude	nt	Photo Signature
1860577841	2004057824	4 050155	BAPARDEKAR AK	SHAY ANANT	
1860577842	2004057825	5 050155	BARE PRITESH M	ANGESH	
1860577843	2004057826	6 050155	BHARTI PRACHI J	IITENDRA	
1860577844	2004057827	7 050155	CHAVAN VAIBHAY	V RAVIKANT	
1860577845	2004057828	3 050155	DUDYE ADITYA G	OPINATH	
1860577846	2004057829	9 050155	INDULKAR SAMP	ADA SUDHIR	
1860577847	2004057830	050155	Jadhav Manali .	JAGANNATH	
1860577848	2004057831	1 050155	KAMBLE MONIKA	MOHAN	
1860577849	2004057832	2 050155	KAMBLE ROHIT R	AMESH	
1860577850	2004057833	3 050155	KAMBLE SAHIL S	IDDHARTHA	
1860577851	2004057834	4 050155	KHANVILKAR SHA	AM RAMESH	

Total Present No.	Total Absent No.	Total Absent No.

Supervisor Notice :

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district office, in prescribe format by exam center In-charge

Institute Co	ode & Name	NTER				
Examination : April 2020 Date : 28/10/2020 Course Code & Name : 415401 HOSPITALITY MANAGEMENT						
Subject :		PRINCIPLE	S OF MANAGEMEN	IT PRACTICAL		
Name Of Su	pervisor :					
Enrolment N	lo. Seat No	. Institu	eName Of Stude	ent	Photo	Signature
1860577852	200405783	35 050155	KULKARNI HARS	SHAL AVINASH	S	
1860577853	200405783	36 050155	MAIL DIPAK ATN	/IARAM	9	
1860577854	200405783	37 050155	MANCHEKAR TE	JAS YASHAVANT		
1860577855	200405783	88 050155	Mapari Muhaj	ASHRAF	. E	
1860577856	200405783	89 050155	PADYAR AMIT D	ATTARAM		
1860577857	200405784	0 050155	PANCHAL PRATH	IAMESH VILAS		
1860577858	200405784	1 050155	PATERE PRASHA	NT TUKARAM		
1860577859	200405784	2 050155	PAWAR MAHESH	I RAMCHANDRA	R	
1860577860	200405784	3 050155	SAWANT SHILPA	A SANTOSH	R	
1860577861	200405784	4 050155	SHEDEKAR SAN	DESH DATTARAM	T	
1860577862	200405784	5 050155	SHERKHAN ISM	AIL SAYYED ALI	S	

Supervisor

Notice :

Exam Center In-Charge

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district

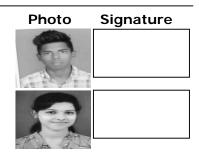
Maharashtra State Board of Skill Development Examinations, Mumbai Attendence Sheet

Institute Code & I	Name 050155	REGAL VOCAT	IONAL TRAINING CEN	NTER
Examination :	April	2020	Date : 28/10/2020	Time: 10 AM TO 1 PM
Course Code & Na	me: 415401 HOS	SPITALITY MANAG	GEMENT	
Subject :	PRINCIPLES	OF MANAGEMEN	T PRACTICAL	

Name Of Supervisor :

Enrolment No. Seat No. InstituteName Of Student 1860577863 2004057846 050155 SHINGARE AMOL RAMCHANDRA

1860577864 2004057847 050155 WAGHATE PRACHI DIPAK



Total Present No.

Notice :

Total Absent No.

Total Absent No.

Exam Center In-Charge

Supervisor

1) Student must check his course, seat no etc before sign.

2) Any Correction in student information should be immidiatly reported to concerned district

Maharashtra State Board of Skill Development Examinations,Mumbai Attendence Sheet						
Institute Code & Name 05		ATIONAL TRAINING (CENTER			
Examination : Apr	ril 2020	Date : 26/10/2020	Time : 10 AM TO 1 PM			
Course Code & Name : 20 ²	1410 PHYSIOTHERAPIST					
Subject : ANA	ATOMY, PHYSIOLOGY AN	D PSYCHOLOGY PRACT	ICAL			
Name Of Supervisor :						
Enrolment No. Seat No.			Photo Signature			
1860577866 2004057848 0	050158 PAKHARE DEEF	PESHKUMAR DILIP				
1860577867 2004057849 0	050158 KHOT NAZIA M	IURADALI				
1860577868 2004057850 C	050158 LELE VINAYAK	VITTHAL				
1860577869 2004057851 0)50158 JAMBHEKAR SI	JMATI DHONDADEV				
1860577870 2004057852 0	050158 SAIGAONKAR (GEETA BHASKAR				
1860577871 2004057853 C	050158 KURAWALE DA	NIYA MAKBUL				
1860577872 2004057854 0	050158 LAD NILIMA VI	SHNU				
1860577873 2004057855 0	050158 SAWANT AKAN	IKASHA RAJESH				
1860577874 2004057856 C	050158 BARVE RUSHIK	KESH DEEPAK				
1860577875 2004057857 0	050158 VICHARE AART	T HEMANT				
1860577876 2004057858 0	050158 PARULEKAR RU	JPALI GURUPRASAD				
Total Present No	Total Absent No.	Total Ab	osent No.			
Supervisor Notice :			am Center In-Charge			
 Student must check his cour Any Correction in student in 	•		erned district			

Maharashtra State Board of Skill Development Examinations,Mumbai Attendence Sheet						
Institute Code & Name 050158	KOVAS VOCATIONAL TRAINING C	ENTER				
Examination : April	2020 Date : 24/10/2020					
Course Code & Name : 201410 PH						
Subject : COMPUTER	APPLICATION PRACTICAL					
Name Of Supervisor :						
Enrolment No. Seat No. Institut	eName Of Student	Photo Signature				
1860577866 2004057848 050158	PAKHARE DEEPESHKUMAR DILIP					
1860577867 2004057849 050158	KHOT NAZIA MURADALI					
1860577868 2004057850 050158	LELE VINAYAK VITTHAL					
1860577869 2004057851 050158	JAMBHEKAR SUMATI DHONDADEV					
1860577870 2004057852 050158	SAIGAONKAR GEETA BHASKAR					
1860577871 2004057853 050158	KURAWALE DANIYA MAKBUL					
1860577872 2004057854 050158	LAD NILIMA VISHNU					
1860577873 2004057855 050158	SAWANT AKANKASHA RAJESH					
1860577874 2004057856 050158	BARVE RUSHIKESH DEEPAK					
1860577875 2004057857 050158	VICHARE AARTI HEMANT					
1860577876 2004057858 050158	PARULEKAR RUPALI GURUPRASAD					
Total Present No. To	tal Absent No. Total Ab	sent No.				
Supervisor <u>Notice</u> : 1) Student must check his course, seat m 2) Any Correction in student information office, in prescribe format by exam cert	to etc before sign. on should be immidiatly reported to conce	am Center In-Charge				

Institute Code & Name	050158 KOVAS \	VOCATIONAL TRAINING CE	ENTER	
Examination : A	pril 202	20 Date : 27/10/2020	Time: 10 AM TO 1 PM	
Course Code & Name : 2	01410 PHYSIOTHERA	PIST		
Subject : E	LECTROTHERAPY, BIO	MECHANICS AND EXERCISE	THERAPY PRACTICAL	
Name Of Supervisor :				
Enrolment No. Seat No.			Photo Signature	
1860577866 2004057848	050158 PAKHARE	DEEPESHKUMAR DILIP		
1860577867 2004057849	050158 KHOT NAZ	IA MURADALI	R	
1860577868 2004057850	050158 LELE VINA	YAK VITTHAL		
1860577869 2004057851	050158 JAMBHEKA	AR SUMATI DHONDADEV		
1860577870 2004057852	050158 SAIGAONK	KAR GEETA BHASKAR		
1860577871 2004057853	050158 KURAWALI	E DANIYA MAKBUL		
1860577872 2004057854	050158 LAD NILIN	IA VISHNU		
1860577873 2004057855	050158 SAWANT A	AKANKASHA RAJESH		
1860577874 2004057856	050158 BARVE RU	SHIKESH DEEPAK		
1860577875 2004057857	050158 VICHARE A	AARTI HEMANT		
1860577876 2004057858	050158 PARULEKA	R RUPALI GURUPRASAD		
Total Present No	Total Absent	No. Total Abs	ent No.	
Supervisor			m Center In-Charge	
Notice :) Student must check his co			in center in onarge	

Maharashtra State Board of Skill Development Examinations,Mumbai Attendence Sheet						
Institute Code &	Name 050158			AINING CEN	NTER	
Examination :	April	2020	Date : 22	/10/2020	Time : 10 AM	TO 1 PM
Course Code & Na	ame : 201410	PHYSIOTHERAPIST				
Subject :	ENGLISH	(COMMUNICATIO	N SKILL) PRA	CTICAL		
Name Of Supervi	sor :					
Enrolment No. Se	at No. Instit	uteName Of Stud	dent		Photo	Signature
1860577866 2004	057848 05015	8 PAKHARE DEEF	PESHKUMAR E	DILIP	9	
1860577867 2004	057849 05015	8 KHOT NAZIA M	IURADALI		A	
1860577868 2004	057850 05015	8 LELE VINAYAK	VITTHAL			
1860577869 2004	057851 05015	8 JAMBHEKAR SL	JMATI DHONE	DADEV	E	
1860577870 2004	057852 05015	8 SAIGAONKAR (GEETA BHASK	AR		
1860577871 2004	057853 05015	8 KURAWALE DA	NIYA MAKBUL	-		
1860577872 2004	057854 05015	8 LAD NILIMA VI	SHNU			
1860577873 2004	057855 05015	8 SAWANT AKAN	KASHA RAJES	SH		
1860577874 2004	057856 05015	8 BARVE RUSHIK	ESH DEEPAK			
1860577875 2004	057857 05015	8 VICHARE AART	I HEMANT			
1860577876 2004	057858 05015	8 PARULEKAR RL	ipali gurupf	RASAD		
Total Present No		Fotal Absent No.		Total Abse	nt No.	
Super	visor			Exan	n Center In-Ch	arge
) Student must chec 2) Any Correction in		-		ed to concern	ed district	

Institute Code & Name 0		DCATIONAL TRAINING CE		
Examination : Apr		Date : 28/10/2020	Time : 10 AM TO 1 PM	
Course Code & Name : 20				
-	THOPAEDICS, NEUROL	OGY, MEDICAL AND SURGIC	AL CONDITION PRACTICAL	
Name Of Supervisor :				
Enrolment No. Seat No. 1860577866 2004057848 (Photo Signature	
1860577867 2004057849 (050158 KHOT NAZIA	A MURADALI		
1860577868 2004057850 (050158 LELE VINAY	AK VITTHAL		
1860577869 2004057851 (050158 JAMBHEKAR	SUMATI DHONDADEV		
1860577870 2004057852 ()50158 SAIGAONKA	R GEETA BHASKAR		
1860577871 2004057853 (050158 KURAWALE	DANIYA MAKBUL		
1860577872 2004057854 (050158 LAD NILIMA	VISHNU		
1860577873 2004057855 (050158 SAWANT AK	ANKASHA RAJESH		
1860577874 2004057856 (050158 BARVE RUSI	HIKESH DEEPAK		
1860577875 2004057857 (050158 VICHARE AA	ARTI HEMANT		
1860577876 2004057858 (050158 PARULEKAR	RUPALI GURUPRASAD		
Total Present No.	Total Absent N	o. Total Abse	ent No.	
Supervisor		Exar	n Center In-Charge	

ivia		Attendenc	e Sheet	minations,Mumbai	
Institute Coo	le & Name 0507	I58 KOVAS VOCA	TIONAL TRAINING CE	NTER	
Examination	I I	2020	Date : 23/10/2020	Time : 10 AM TO 1 PM	
		0 PHYSIOTHERAPIST			
Subject :	PSYCH	IOLOGY PRACTICAL			
Name Of Sup	ervisor :				
		tituteName Of Stud		Photo Signate	ure
1860577866	2004057848 050	158 PAKHARE DEEPE	ESHKUMAR DILIP		
1860577867	2004057849 050	158 KHOT NAZIA MU	JRADALI	A	
1860577868	2004057850 050	158 LELE VINAYAK V	/ITTHAL		
1860577869	2004057851 050	158 JAMBHEKAR SU	MATI DHONDADEV		
1860577870	2004057852 050	158 SAIGAONKAR G	EETA BHASKAR		
1860577871	2004057853 050	158 KURAWALE DAN	IIYA MAKBUL		
1860577872	2004057854 050	158 LAD NILIMA VIS	HNU		
1860577873	2004057855 050	158 SAWANT AKANK	ASHA RAJESH		
1860577874	2004057856 050	158 BARVE RUSHIKE	ESH DEEPAK		
1860577875	2004057857 050	158 VICHARE AARTI	HEMANT		
1860577876	2004057858 050	158 PARULEKAR RUF	PALI GURUPRASAD		
Total Presen	t No.	Total Absent No.	Total Abse	ent No.	
S	upervisor		Exar	n Center In-Charge	
Notice :	abaalt big agunag	seat no etc before sign.			