Institute Code & Name 020413 Lalji Mehrotra Vocational Training Central

**Examination**: April 2023 **Date**: 11/05/2023 **Time**: 10 AM TO 1 PM

Course Code & Name: 201421 DIPLOMA COURSE IN DIALYSIS TECHNOLOGY

Subject: COMPUTER APPLICATION THEORY

### Name Of Supervisor:

Seat No.	Institute	Name Of Student	Photo Signature
2304027771	020413	CHAUGULE BHARAT RAMCHANDRA	
2304027772	020413	PANDIT SAKSHI SURENDRA	A
2304027773	020413	SURVE MAMTA SUDHAKAR	
2304027774	020413	LAD SAKSHI SANTOSH	

Total Present No.	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 office, in prescribe format by exam center In-charge

Institute Code & Name 020413 Lalji Mehrotra Vocational Training Central

**Examination**: April 2023 **Date**: 10/05/2023 **Time**: 10 AM TO 1 PM

Course Code & Name: 201421 DIPLOMA COURSE IN DIALYSIS TECHNOLOGY

**Subject**: ENTREPRENEURSHIP THEORY

Name Of Supervisor:

Seat No.	Institute	Name Of Student	Photo	Signature
2304027773	020413	SURVE MAMTA SUDHAKAR		
2304027774	020413	LAD SAKSHI SANTOSH		

Total Present No	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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Institute Code & Name 020413 Lalji Mehrotra Vocational Training Central

**Examination**: April 2023 **Date**: 13/05/2023 **Time**: 10 AM TO 1 PM

Course Code & Name: 201421 DIPLOMA COURSE IN DIALYSIS TECHNOLOGY

Subject: HEMODIALYSIS-II THEORY

Name Of Supervisor:

Seat No.	Institute	Name Of Student	Photo Signature
2304027772	020413	PANDIT SAKSHI SURENDRA	A
2304027773	020413	SURVE MAMTA SUDHAKAR	

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

Supervisor

**Exam Center In-Charge** 

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Institute Code & Name 020413 Lalji Mehrotra Vocational Training Central

**Examination**: April 2023 **Date**: 12/05/2023 **Time**: 10 AM TO 1 PM

Course Code & Name: 302409 ELECTRICIAN

Subject: BASIC ELECTRICITY AND MEASUREMENT THEORY

Name Of Supervisor :

Seat No. Institute Name Of Student 2304027788 020413 SHAIKH ANAS ILYAS

Photo Signature

Total Present No	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 office, in prescribe format by exam center In-charge

Institute Code & Name 020413 Lalji Mehrotra Vocational Training Central

**Examination**: April 2023 **Date**: 11/05/2023 **Time**: 10 AM TO 1 PM

Course Code & Name: 302409 ELECTRICIAN

Subject: COMPUTER APPLICATION THEORY

Name Of Supervisor :

Seat No. Institute Name Of Student 2304027788 020413 SHAIKH ANAS ILYAS

Photo Signature

Total Present No.	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 office, in prescribe format by exam center In-charge

Institute Code & Name 020413 Lalji Mehrotra Vocational Training Central

**Examination**: April 2023 **Date**: 10/05/2023 **Time**: 10 AM TO 1 PM

Course Code & Name: 302409 ELECTRICIAN

**Subject**: ENTREPRENEURSHIP THEORY

Name Of Supervisor:

Seat No. Institute Name Of Student 2304027788 020413 SHAIKH ANAS ILYAS

Photo S

Signature

Total Present No	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 office, in prescribe format by exam center In-charge

Institute Code & Name 020413 Lalji Mehrotra Vocational Training Central

**Examination**: April 2023 **Date**: 15/05/2023 **Time**: 10 AM TO 1 PM

Course Code & Name: 302409 ELECTRICIAN

Subject: WORKSHOP CALCULATION, SCIENCE AND DRAWING THEORY

Name Of Supervisor :

Seat No. Institute Name Of Student 2304027788 020413 SHAIKH ANAS ILYAS

Photo

Signature



Total Present No	Total Absent No.	To	otal 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

Institute Code & Name 020432 S M Arora Suburban College Of Paramedical Education

**Examination**: April 2023 **Date**: 15/05/2023 **Time**: 10 AM TO 1 PM

Course Code & Name: 201404 MEDICAL LAB TECHNICIAN

Subject: MICROBIOLOGY AND MEDICAL CARE THEORY

Name Of Supervisor :

Seat No. Institute Name Of Student Photo Signature

2304027775 020432 NAVNEETH VASANTHAKUMAR

Total Present No	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 office, in prescribe format by exam center In-charge

S M Arora Suburban College Of Paramedical Education Institute Code & Name 020432

**Date**: 10/05/2023 **Examination:** April Time: 10 AM TO 1 PM

Course Code & Name: 201404 MEDICAL LAB TECHNICIAN

Subject: PHYSICAL BIOLOGY (BOTONY & ZOOLOGY) THEORY

Name Of Supervisor:

Seat No. Name Of Student Institute Photo Signature 2304027775 NAVNEETH VASANTHAKUMAR 020432

Total Present No.	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 office, in prescribe format by exam center In-charge

Kes Paramedical Vocational Training Center Institute Code & Name 020433

**Examination:** April **Date**: 13/05/2023 Time: 10 AM TO 1 PM

Course Code & Name: 201404 MEDICAL LAB TECHNICIAN

Subject: **BIOCHEMISTRY THEORY** 

Name Of Supervisor:

Seat No. Name Of Student Signature Institute Photo

2304027780 KHAN ISHTIYAQ AHMED MUQEEM AHMED 020433

Total Present No.	Tot	al 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 office, in prescribe format by exam center In-charge

Institute Code & Name 020435 Ava Elma College Of Vocational Education

**Examination**: April 2023 **Date**: 11/05/2023 **Time**: 10 AM TO 1 PM

Course Code & Name: 306402 AUTO ENGINEERING TECHNICIAN

Subject: COMPUTER APPLICATION THEORY

Name Of Supervisor:

Seat No. Institute Name Of Student Photo Signature 2304027778 020435 ANSARI OWAIS NAWAB AHMED

IMED

Total Present No.	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 office, in prescribe format by exam center In-charge

Institute Code & Name 020435 Ava Elma College Of Vocational Education

**Examination**: April 2023 **Date**: 09/05/2023 **Time**: 10 AM TO 1 PM

Course Code & Name : 306402 AUTO ENGINEERING TECHNICIAN

Subject : ENGLISH (COMMUNICATION SKILL) THEORY

Name Of Supervisor:

Seat No. Institute Name Of Student 2304027776 020435 SHARMA ANISH JITENDRA Photo

Signature

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

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

Institute Code & Name 020435 Ava Elma College Of Vocational Education

**Examination**: April 2023 **Date**: 10/05/2023 **Time**: 10 AM TO 1 PM

Course Code & Name: 306402 AUTO ENGINEERING TECHNICIAN

**Subject**: ENTREPRENEURSHIP THEORY

Name Of Supervisor:

Seat No. Institute Name Of Student 2304027776 020435 SHARMA ANISH JITENDRA Photo

Signature



Total Present No	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 office, in prescribe format by exam center In-charge

Ava Elma College Of Vocational Education Institute Code & Name 020435

**Examination:** April Date: 15/05/2023 Time: 10 AM TO 1 PM

Course Code & Name: 306402 AUTO ENGINEERING TECHNICIAN

Subject: GARAGE MANAGEMENT AND PRACTICE THEORY

Name Of Supervisor:

Seat No. Name Of Student Institute

2304027777 DRAVIDER DINESH KUMAR P.VINAYAK 020435

**Photo** 

Signature

(0.0)	

Total Present No	Total Absent I	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

Institute Code & Name 020444 Tech Mahindra Foundation Smart Academy Of Healthcare Examination: April 2023 Date: 11/05/2023 Time: 10 AM TO 1 PM

Course Code & Name: 201404 MEDICAL LAB TECHNICIAN

Subject: COMPUTER APPLICATION THEORY

Name Of Supervisor:

Seat No. Institute Name Of Student

2304027787 020444 MORE SIMRAN DHANANJAY

Photo

Signature



Total Present No	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 office, in prescribe format by exam center In-charge

Tech Mahindra Foundation Smart Academy Of Healthcare Institute Code & Name 020444 **Examination:** April **Date**: 10/05/2023 Time: 10 AM TO 1 PM

Course Code & Name: 201404 MEDICAL LAB TECHNICIAN

Subject: PHYSICAL BIOLOGY (BOTONY & ZOOLOGY) THEORY

Name Of Supervisor:

Seat No. Name Of Student Institute 2304027787 020444 MORE SIMRAN DHANANJAY **Photo** 

Signature

1	

Total Present No	Total Absent No.	Т	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

Institute Code & Name 020444 Tech Mahindra Foundation Smart Academy Of Healthcare Examination: April 2023 Date: 12/05/2023 Time: 10 AM TO 1 PM

Course Code & Name: 201422 MEDICAL RECORDS TECHNOLOGY

Subject: MEDICAL CODING & BILLING THEORY

Name Of Supervisor:

Seat No. Institute Name Of Student
2304027786 020444 GHANEKAR UNNATI GANPAT

Photo	Signature

Total Present No.	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 office, in prescribe format by exam center In-charge