Institute Code & Name :170471 Noble Vocational Training Center

Examination: April 2024 **Date**: 24/05/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 201417 NATUROPATHY AND YOGIC SCIENCE

Subject: ENGLISH (COMMUNICATION SKILL) THEORY

Name Of Supervisor:

| Seat No. | Institute | Name Of Student | Photo | Signature |
|------------|-----------|-------------------------|-------|-----------|
| 2404177787 | 170471 | GAWANDE VARSHA SHYAM | | |
| 2404177788 | 170471 | SHAIKH AJIJ KARIM | B | |
| 2404177789 | 170471 | RAUT KALYANI TULSHIRAM | | |
| 2404177790 | 170471 | BHAWAR YOGESH DATTATRAY | 8 | |

| 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 :170471 Noble Vocational Training Center

Examination: April 2024 **Date**: 29/05/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 201417 NATUROPATHY AND YOGIC SCIENCE

Subject: PRACTICE IN NATUROPATHY THEORY

Name Of Supervisor:

| Seat No. | Institute | Name Of Student | Photo | Signature |
|------------|-----------|-------------------------|-------|-----------|
| 2404177788 | 170471 | SHAIKH AJIJ KARIM | 13 | |
| 2404177789 | 170471 | RAUT KALYANI TULSHIRAM | | |
| 2404177790 | 170471 | BHAWAR YOGESH DATTATRAY | 8 | |

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

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 170471 Noble Vocational Training Center

Examination: April 2024 **Date**: 25/05/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 201417 NATUROPATHY AND YOGIC SCIENCE

Subject: PSYCHOLOGY THEORY

Name Of Supervisor:

| Seat No. 2404177787 | Institute 170471 | Name Of Student GAWANDE VARSHA SHYAM | Photo Signature |
|----------------------------|---------------------|---|-----------------|
| 2404177788 | 170471 | SHAIKH AJIJ KARIM | |
| 2404177789 | 170471 | RAUT KALYANI TULSHIRAM | |
| 2404177790 | 170471 | BHAWAR YOGESH DATTATRAY | |

| Total Present No | Total Absent No. | Total Absent No. | |
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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 :170471 Noble Vocational Training Center

Examination: April 2024 **Date**: 30/05/2024 Time: 10 AM TO 1 PM

Course Code & Name: 201417 NATUROPATHY AND YOGIC SCIENCE Subject: YOGA AND VARIOUS THERAPIES THEORY

Name Of Supervisor:

Seat No. Name Of Student Signature Institute Photo 2404177790 170471 BHAWAR YOGESH DATTATRAY

| 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 :170541 Samarth Vocational Training Center

Examination: April 2024 **Date**: 28/05/2024 **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 Photo Signature

2404177786 170541 GULVE AJINATH SAMADHAN

Prioto 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 :170541 Samarth Vocational Training Center

Examination: April 2024 **Date**: 25/05/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 302409 ELECTRICIAN

Subject: BUSINESS ECONOMICS THEORY

Name Of Supervisor:

Seat No. Institute Name Of Student Photo Signature

2404177786 170541 GULVE AJINATH SAMADHAN

Photo Signature

| Total Present No. | Total Absent No. | Total Absent No. | |
|-------------------|------------------|------------------|--|
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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 :170541 Samarth Vocational Training Center

Examination: April 2024 **Date**: 27/05/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 302409 ELECTRICIAN

Subject: COMPUTER APPLICATION THEORY

Name Of Supervisor:

Seat No. Institute Name Of Student Photo Signature

2404177786 170541 GULVE AJINATH SAMADHAN

Prioto Signature

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

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 :170541 Samarth Vocational Training Center

Examination: April 2024 **Date**: 29/05/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 302409 ELECTRICIAN

Subject: ELECTRICIAN PRACTICE THEORY

Name Of Supervisor:

Seat No. Institute Name Of Student Photo Signature

2404177786 170541 GULVE AJINATH SAMADHAN

Photo Signature

| Total Present No. | Total Absent No. | Total Absent No. | |
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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 :170541 Samarth Vocational Training Center

Examination: April 2024 **Date**: 24/05/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 302409 ELECTRICIAN

Subject: ENGLISH (COMMUNICATION SKILL) THEORY

Name Of Supervisor :

Seat No. Institute Name Of Student Photo

2404177786 170541 GULVE AJINATH SAMADHAN

Photo Signature

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

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

Samarth Vocational Training Center Institute Code & Name :170541

Date: 30/05/2024 **Examination:** April 2024 Time: 10 AM TO 1 PM

Course Code & Name: 302409 ELECTRICIAN

Subject: WORKSHOP CALCULATION, SCIENCE AND DRAWING THEORY

Name Of Supervisor:

Seat No. Name Of Student Photo Institute 2404177786 **GULVE AJINATH SAMADHAN** 170541

Signature

| Total Present No | To | tal 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 :170543 Shree Sai Paramedical Vocational Training Center

Examination: April 2024 **Date**: 28/05/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 201404 MEDICAL LAB TECHNICIAN

Subject: ANATOMY PHYSIOLOGY AND PATHOLOGY THEORY

Name Of Supervisor :

| Seat No. | Institute | Name Of Student | Photo Signature |
|------------|-----------|---------------------------|-----------------|
| 2404177771 | 170543 | SANE MUKUND SHANKARRAO | |
| 2404177772 | 170543 | SALUNKE ASHISH RAKHAMAJI | |
| 2404177773 | 170543 | THOMBRE SAMADHAN DIGAMBAR | |

| 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 :170543 Shree Sai Paramedical Vocational Training Center

Examination: April 2024 **Date**: 29/05/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 201404 MEDICAL LAB TECHNICIAN

Subject: BIOCHEMISTRY THEORY

Name Of Supervisor:

| Seat No. | Institute | Name Of Student | Photo Signature |
|------------|-----------|---------------------------|-----------------|
| 2404177771 | 170543 | SANE MUKUND SHANKARRAO | 3 |
| 2404177772 | 170543 | SALUNKE ASHISH RAKHAMAJI | |
| 2404177773 | 170543 | THOMBRE SAMADHAN DIGAMBAR | 8 |

| 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 :170543 Shree Sai Paramedical Vocational Training Center

Examination: April 2024 **Date**: 25/05/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 201404 MEDICAL LAB TECHNICIAN **Subject**: BUSINESS ECONOMICS THEORY

Name Of Supervisor:

| Seat No. | Institute | Name Of Student | Photo Signature |
|------------|-----------|---------------------------|-----------------|
| 2404177771 | 170543 | SANE MUKUND SHANKARRAO | 3 |
| 2404177772 | 170543 | SALUNKE ASHISH RAKHAMAJI | |
| 2404177773 | 170543 | THOMBRE SAMADHAN DIGAMBAR | |

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

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 :170543 Shree Sai Paramedical Vocational Training Center

Examination: April 2024 **Date**: 27/05/2024 **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 | Photo Signature |
|------------|-----------|---------------------------|-----------------|
| 2404177771 | 170543 | SANE MUKUND SHANKARRAO | 3 |
| 2404177772 | 170543 | SALUNKE ASHISH RAKHAMAJI | |
| 2404177773 | 170543 | THOMBRE SAMADHAN DIGAMBAR | |

| Total Present No. | Total Absent No. | Total Absent No. | |
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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 :170543 Shree Sai Paramedical Vocational Training Center

Examination: April 2024 **Date**: 24/05/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 201404 MEDICAL LAB TECHNICIAN

Subject: ENGLISH (COMMUNICATION SKILL) THEORY

Name Of Supervisor:

| Seat No. | Institute | Name Of Student | Photo Signature |
|------------|-----------|---------------------------|-----------------|
| 2404177771 | 170543 | SANE MUKUND SHANKARRAO | 3 |
| 2404177772 | 170543 | SALUNKE ASHISH RAKHAMAJI | |
| 2404177773 | 170543 | THOMBRE SAMADHAN DIGAMBAR | |

| Total Present No. | Total Absent No. | Total Absent No. | |
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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 :170543 Shree Sai Paramedical Vocational Training Center

Examination: April 2024 **Date**: 30/05/2024 **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 |
|------------|-----------|---------------------------|-----------------|
| 2404177771 | 170543 | SANE MUKUND SHANKARRAO | 3 |
| 2404177772 | 170543 | SALUNKE ASHISH RAKHAMAJI | |
| 2404177773 | 170543 | THOMBRE SAMADHAN DIGAMBAR | |

| Total Present No | Total Absent No. | Total Absent No. | |
|------------------|------------------|------------------|--|
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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 :170547 Padmavati Vocational Training Center

Examination: April 2024 **Date**: 28/05/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 201404 MEDICAL LAB TECHNICIAN

Subject: ANATOMY PHYSIOLOGY AND PATHOLOGY THEORY

Name Of Supervisor:

| Seat No. | Institute | Name Of Student | Photo Signature |
|------------|-----------|--------------------------------|-----------------|
| 2404177791 | 170547 | KSHIRSAGAR VAISHNAV NITIN | |
| 2404177792 | 170547 | KHAN PATHAN JUNAID KHAN KHALIL | |
| 2404177793 | 170547 | PANDAV VISHAL SUBHASH | |

| 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 :170547 Padmavati Vocational Training Center

Examination: April Date: 29/05/2024 Time: 10 AM TO 1 PM

Course Code & Name: 201404 MEDICAL LAB TECHNICIAN

Subject: **BIOCHEMISTRY THEORY**

Name Of Supervisor:

Seat No. Name Of Student Institute Photo Signature 2404177793 170547 PANDAV VISHAL SUBHASH

| 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 :170547 Padmavati Vocational Training Center

Examination: April 2024 **Date**: 27/05/2024 **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
2404177793 170547 PANDAV VISHAL SUBHASH

Photo Signa

Signature

| Total Present No | Total Absent No | . Total Absent No. | |
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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 :170547 Padmavati Vocational Training Center

Examination: April Date: 24/05/2024 Time: 10 AM TO 1 PM

Course Code & Name: 201404 MEDICAL LAB TECHNICIAN

Subject: ENGLISH (COMMUNICATION SKILL) THEORY

Name Of Supervisor:

Seat No. Name Of Student Institute 2404177793 170547

PANDAV VISHAL SUBHASH

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 :170547 Padmavati Vocational Training Center

Examination: April 2024 **Date**: 30/05/2024 **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
2404177793 170547 PANDAV VISHAL SUBHASH

| Total Present No. | Total Absent No. | Total Absent No. | |
|-------------------|------------------|------------------|--|
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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 :170547 Padmavati Vocational Training Center

Examination: April 2024 **Date**: 25/05/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 201404 MEDICAL LAB TECHNICIAN

Subject: PSYCHOLOGY THEORY

Name Of Supervisor:

Seat No. Institute Name Of Student Photo S

2404177793 170547 PANDAV VISHAL SUBHASH

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 :170553 Pepals Vocational Training Center Waluj

Examination: April 2024 **Date**: 29/05/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 302409 ELECTRICIAN

Subject: ELECTRICIAN PRACTICE THEORY

Name Of Supervisor :

Seat No. Institute Name Of Student Photo Signature

2404177774 170553 BODADE SHANTIDUT SHRIKRISHNA

Photo Signature

| Total Present No | Total Absent No. | Total Absent No. | |
|------------------|------------------|------------------|--|
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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 :170577 Apex Vocational Training Center

Examination: April **Date**: 28/05/2024 Time: 10 AM TO 1 PM

Course Code & Name: 201404 MEDICAL LAB TECHNICIAN

Subject: ANATOMY PHYSIOLOGY AND PATHOLOGY THEORY

Name Of Supervisor:

Seat No. Name Of Student Institute 2404177776 170577 BADAK PARMESHWAR KAILAS Photo

Signature

| Total Present No. | Total Absent No. | Total Absent No. | |
|-------------------|------------------|------------------|--|
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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 :170577 Apex Vocational Training Center

Examination: April 2024 **Date**: 24/05/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 201404 MEDICAL LAB TECHNICIAN

Subject: ENGLISH (COMMUNICATION SKILL) THEORY

Name Of Supervisor :

Seat No. Institute Name Of Student
2404177778 170577 SARWADE NITESH BANSILAL

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| Total Present No | Total Absent No. | Т | Total Absent No. | |
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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 :170577 Apex Vocational Training Center

Date: 30/05/2024 **Examination:** April Time: 10 AM TO 1 PM

Course Code & Name: 201404 MEDICAL LAB TECHNICIAN

Subject: MICROBIOLOGY AND MEDICAL CARE THEORY

Name Of Supervisor:

Seat No. Name Of Student Institute 2404177777 170577 SAYYAD TAUFIK AYYUB **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 :170577 Apex Vocational Training Center

Examination: April 2024 **Date**: 25/05/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 201404 MEDICAL LAB TECHNICIAN

Subject: PSYCHOLOGY THEORY

Name Of Supervisor :

| Seat No. | Institute | Name Of Student | Photo | Signature |
|------------|-----------|-------------------------|-------|-----------|
| 2404177777 | 170577 | SAYYAD TAUFIK AYYUB | | |
| 2404177778 | 170577 | SARWADE NITESH BANSILAL | | |

| 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 :170582

Examination: April 2024 **Date**: 28/05/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 201404 MEDICAL LAB TECHNICIAN

Subject: ANATOMY PHYSIOLOGY AND PATHOLOGY THEORY

Name Of Supervisor :

Seat No. Institute Name Of Student 2404177781 170582 DHEPLE JYOTI SOMINATH 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 :170582

Examination: April 2024 **Date**: 27/05/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 201404 MEDICAL LAB TECHNICIAN

Subject: APPLIED SCIENCES (PHYSICS & CHEMISTRY) THEORY

Name Of Supervisor :

Seat No. Institute Name Of Student Photo Signature
2404177779 170582 JADHAV PRATIBHA RAJU

9

| Total Present No. | Tot | al Absent No. | Total Absent No. | |
|-------------------|-----|---------------|------------------|--|
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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 :170582

Examination: April 2024 **Date**: 24/05/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 201404 MEDICAL LAB TECHNICIAN

Subject: ENGLISH (COMMUNICATION SKILL) THEORY

Name Of Supervisor:

Seat No. Institute Name Of Student 2404177780 170582 GORE JAYA HARI

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 :170635 Swami Vivekanand Vocational Traning Center Aurangabad Examination: April 2024 Date: 28/05/2024 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 Photo Student LOKHANDE VISHAL VISHNU

3

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 :170635 Swami Vivekanand Vocational Traning Center Aurangabad Examination: April 2024 Date: 29/05/2024 Time: 10 AM TO 1 PM

Course Code & Name: 302409 ELECTRICIAN

Subject: ELECTRICIAN PRACTICE THEORY

Name Of Supervisor:

Seat No. Institute Name Of Student Photo Signature
2404177796 170635 LOKHANDE VISHAL VISHNU

| 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 :170637 Matoshri Vocational Institute

Examination: April 2024 **Date**: 28/05/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 201417 NATUROPATHY AND YOGIC SCIENCE

Subject: ANATOMY PHYSIOLOGY AND PATHOLOGY THEORY

Name Of Supervisor:

Seat No. Institute Name Of Student
2404177795 170637 SAYYAD VASIM ALI YAKUB ALI

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 :170637 Matoshri Vocational Institute

Examination: April 2024 **Date**: 27/05/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 201417 NATUROPATHY AND YOGIC SCIENCE

Subject: COMPUTER APPLICATION THEORY

Name Of Supervisor :

Seat No. Institute Name Of Student
2404177795 170637 SAYYAD VASIM ALI YAKUB ALI

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 :170637 Matoshri Vocational Institute

Examination: April 2024 **Date**: 24/05/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 201417 NATUROPATHY AND YOGIC SCIENCE

Subject: ENGLISH (COMMUNICATION SKILL) THEORY

Name Of Supervisor:

Seat No. Institute Name Of Student
2404177795 170637 SAYYAD VASIM ALI YAKUB ALI

Photo

Signature

| Total Present No. | Total Absent No. | Total Absent No. | |
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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 :170637 Matoshri Vocational Institute

Examination: April 2024 Date: 29/05/2024 Time: 10 AM TO 1 PM

Course Code & Name: 201417 NATUROPATHY AND YOGIC SCIENCE

Subject: PRACTICE IN NATUROPATHY THEORY

Name Of Supervisor:

Seat No. Name Of Student Institute 2404177795 170637 SAYYAD VASIM ALI YAKUB ALI Photo

Signature

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| Total Present No | Total Absent No. | Total Absent No |). |
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Supervisor

Exam Center In-Charge

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Institute Code & Name :170637 Matoshri Vocational Institute

Examination: April 2024 **Date**: 25/05/2024 Time: 10 AM TO 1 PM

Course Code & Name: 201417 NATUROPATHY AND YOGIC SCIENCE

Subject: **PSYCHOLOGY THEORY**

Name Of Supervisor:

Seat No. Name Of Student Institute 2404177795 170637 SAYYAD VASIM ALI YAKUB ALI Photo

Signature

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| Total Present No. | Total Absent No. | Total Absent No. |
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Supervisor

Exam Center In-Charge

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Institute Code & Name :170637 Matoshri Vocational Institute

Examination: April 2024 **Date**: 30/05/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 201417 NATUROPATHY AND YOGIC SCIENCE
Subject: YOGA AND VARIOUS THERAPIES THEORY

Name Of Supervisor:

Seat No. Institute Name Of Student Photo Sig 2404177795 170637 SAYYAD VASIM ALI YAKUB ALI

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Signature

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

Supervisor

Exam Center In-Charge

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Institute Code & Name :170637 Matoshri Vocational Institute

Examination: April 2024 **Date**: 28/05/2024 **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
2404177794 170637 MANDGE GANESH VINAYAK

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.
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Institute Code & Name :170637 Matoshri Vocational Institute

Examination: April 2024 **Date**: 27/05/2024 Time: 10 AM TO 1 PM

Course Code & Name: 302409 ELECTRICIAN

Subject: COMPUTER APPLICATION THEORY

Name Of Supervisor :

Seat No. Name Of Student Institute 2404177794 170637

MANDGE GANESH VINAYAK



Signature

| Total Present No | Total Absent No. | Total Absent No. | |
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Supervisor

Exam Center In-Charge

- 1) Student must check his course, seat no etc before sign.
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Institute Code & Name :170637 Matoshri Vocational Institute

Examination: April 2024 **Date**: 29/05/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 302409 ELECTRICIAN

Subject: ELECTRICIAN PRACTICE THEORY

Name Of Supervisor :

Seat No. Institute Name Of Student
2404177794 170637 MANDGE GANESH VINAYAK

Photo

Signature

| Total Present No. | Total Absent No. | Total Absent No. |
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Supervisor

Exam Center In-Charge

- 1) Student must check his course, seat no etc before sign.
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Institute Code & Name :170637 Matoshri Vocational Institute

Examination: April 2024 **Date**: 24/05/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 302409 ELECTRICIAN

Subject: ENGLISH (COMMUNICATION SKILL) THEORY

Name Of Supervisor:

Seat No. Institute Name Of Student
2404177794 170637 MANDGE GANESH VINAYAK

Photo

Signature

| Total Absent No. |
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Supervisor

Exam Center In-Charge

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Institute Code & Name :170637 Matoshri Vocational Institute

Examination: April 2024 **Date**: 25/05/2024 Time: 10 AM TO 1 PM

Course Code & Name: 302409 ELECTRICIAN Subject: **PSYCHOLOGY THEORY**

Name Of Supervisor :

Seat No. Name Of Student Institute

2404177794 170637 MANDGE GANESH VINAYAK Photo

Signature



| Total Present No | Total Absent No. | Total Absent No. |] |
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Supervisor

Exam Center In-Charge

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Institute Code & Name :170637 Matoshri Vocational Institute

Examination: April 2024 **Date**: 30/05/2024 **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
2404177794 170637 MANDGE GANESH VINAYAK

Photo

Signature

| Total Present No. | Total Absent No. | Total Absent No. | |
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Supervisor

Exam Center In-Charge

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Institute Code & Name :170665 kai.Raybhanji Jadhav Electrical Kaushalya Vikas Sanstha

Examination: April 2024 Date : 28/05/2024 Time : 10 AM TO 1 PM

Course Code & Name: 302409 ELECTRICIAN

Subject: BASIC ELECTRICITY AND MEASUREMENT THEORY

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| warne | OI | Supervisor | |

| Seat No. 2404177782 | Institute 170665 | Name Of Student DABHADE AJINATH NARAYAN | Photo | Signature |
|----------------------------|---------------------|--|-------|-----------|
| 2404177783 | 170665 | DEVKAR DAYANAND SUBHASH | | |

| Total Present No. | Total Absent No. | Total Absent No. | |
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Supervisor

Exam Center In-Charge

- 1) Student must check his course, seat no etc before sign.
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Institute Code & Name :170665 kai.Raybhanji Jadhav Electrical Kaushalya Vikas Sanstha

Examination: April 2024 Date: 27/05/2024 Time: 10 AM TO 1 PM

Course Code & Name: 302409 ELECTRICIAN

Subject: COMPUTER APPLICATION THEORY

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| Seat No. 2404177782 | Institute 170665 | Name Of Student DABHADE AJINATH NARAYAN | Photo | Signature |
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| 2404177783 | 170665 | DEVKAR DAYANAND SUBHASH | | |
| 2404177784 | 170665 | GAIKWAD SACHIN DAMODHAR | | |
| 2404177785 | 170665 | MOKASE RAVINDRA JAYVANTRAO | | |
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| Total Present No. | Total Absent No. | Total Absent No. |
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Supervisor

Exam Center In-Charge

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Institute Code & Name :170665 kai.Raybhanji Jadhav Electrical Kaushalya Vikas Sanstha

Examination: April 2024 Date: 29/05/2024 Time: 10 AM TO 1 PM

Course Code & Name: 302409 ELECTRICIAN

Subject: ELECTRICIAN PRACTICE THEORY

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| Seat No. 2404177782 | Institute 170665 | Name Of Student DABHADE AJINATH NARAYAN | Photo | Signature |
|----------------------------|---------------------|--|-------|-----------|
| 2404177783 | 170665 | DEVKAR DAYANAND SUBHASH | | |
| 2404177785 | 170665 | MOKASE RAVINDRA JAYVANTRAO | | |

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Examination: April 2024 Date : 24/05/2024 Time : 10 AM TO 1 PM

Course Code & Name: 302409 ELECTRICIAN

Subject: ENGLISH (COMMUNICATION SKILL) THEORY

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| Seat No. 2404177783 | Institute 170665 | Name Of Student DEVKAR DAYANAND SUBHASH | Photo | Signature |
|----------------------------|---------------------|--|-------|-----------|
| 2404177784 | 170665 | GAIKWAD SACHIN DAMODHAR | | |

| Total Present No. | Total Absent No. | Total Absent No. | |
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Institute Code & Name :170665 kai.Raybhanji Jadhav Electrical Kaushalya Vikas Sanstha

Examination: April 2024 Date: 25/05/2024 Time: 10 AM TO 1 PM

Course Code & Name: 302409 ELECTRICIAN

Subject: ENTREPRENEURSHIP THEORY

Name Of Supervisor:

| Seat No. | Institute | Name Of Student | Photo | Signature |
|------------|-----------|-------------------------|-------|-----------|
| 2404177783 | 170665 | DEVKAR DAYANAND SUBHASH | | |
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Examination: April 2024 Date: 30/05/2024 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 | Photo | Signature |
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| 2404177782 | 170665 | DABHADE AJINATH NARAYAN | | |
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