Institute Code & Nam	ne 230519 K T	Patil Instit	ute Of Health Sciences	5
Examination :	April	2024	Date: 28/05/2024	Time: 10 AM TO 1 PM
Course Code & Name : 201404 MEDICAL LAB TECHNICIAN				
Subject :	ANATOMY PHYSIC	ATOMY PHYSIOLOGY AND PATHOLOGY THEORY		

#### Name Of Supervisor :

<b>Seat No.</b> 2404237771	Institute 230519	Name Of Student BONGALE SNEHAL SHANTINATH	Photo Signature
2404237772	230519	CHOURE POOJA UTTAMRAO	
2404237773	230519	SHINDE ROHIT RAMLING	

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 & Nam	ne 230519	K T Patil Insti	tute Of Health Science	S
Examination :	April	2024	Date : 29/05/2024	Time: 10 AM TO 1 PM
Course Code & Name : 201404 MEDICAL LAB TECHNICIAN				
Subject :	BIOCHEMIST	ISTRY THEORY		

#### Name Of Supervisor :

<b>Seat No.</b> 2404237771	Institute 230519	Name Of Student BONGALE SNEHAL SHANTINATH	Photo Signature
2404237772	230519	CHOURE POOJA UTTAMRAO	
2404237773	230519	SHINDE ROHIT RAMLING	

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 & Nam	ne 230519 K	T Patil Instit	ute Of Health Sciences	5
Examination :	April	2024	Date : 27/05/2024	Time: 10 AM TO 1 PM
Course Code & Name : 201404 MEDICAL LAB TECHNICIAN				
Subject :	COMPUTER APP	TER APPLICATION THEORY		

#### Name Of Supervisor :

Seat No.	Institute	Name Of Student	Photo Signature
2404237771	230519	BONGALE SNEHAL SHANTINATH	
2404237772	230519	CHOURE POOJA UTTAMRAO	
2404237773	230519	SHINDE ROHIT RAMLING	

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 230519		K T Patil Institute Of Health Sciences		S
Examination :	April	2024	Date: 24/05/2024	Time: 10 AM TO 1 PM
Course Code & Name : 201404 MEDICAL LAB TECHNICIAN				
Subject :	ENGLISH (CO	ISH (COMMUNICATION SKILL) THEORY		

#### Name Of Supervisor :

Seat No.	Institute	Name Of Student	Photo Signature
2404237771	230519	BONGALE SNEHAL SHANTINATH	
			The second second
2404237772	230519	CHOURE POOJA UTTAMRAO	
2404237773	230519	SHINDE ROHIT RAMLING	

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 & Nam	ne 230519 K	T Patil Instit	ute Of Health Sciences	5
Examination :	April	2024	Date: 30/05/2024	Time: 10 AM TO 1 PM
Course Code & Name : 201404 MEDICAL LAB TECHNICIAN				
Subject :	MICROBIOLOG	BIOLOGY AND MEDICAL CARE THEORY		

#### Name Of Supervisor :

<b>Seat No.</b> 2404237771	<b>Institute</b> 230519	Name Of Student BONGALE SNEHAL SHANTINATH	Photo Signature
2404237772	230519	CHOURE POOJA UTTAMRAO	
2404237773	230519	SHINDE ROHIT RAMLING	

Total Present No

Notice :

Total Absent No.

Total Absent No.

## Supervisor

Exam Center In-Charge

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

Institute Code & Name 230519		K T Patil Institute Of Health Sciences		5
Examination :	April	2024	Date: 25/05/2024	Time: 10 AM TO 1 PM
Course Code & Name : 201404 MEDICAL LAB TECHNICIAN				
Subject :	PSYCHOLOGY	CHOLOGY THEORY		

#### Name Of Supervisor :

Seat No.	Institute	Name Of Student	Photo Signature
2404237771	230519	BONGALE SNEHAL SHANTINATH	
			Mr Charles
2404237772	230519	CHOURE POOJA UTTAMRAO	
2404237773	230519	SHINDE ROHIT RAMLING	

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 & Nar	ne 230520	Renuka Vocat	ional 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
2404237774	230520	SATHE AKSHATA CHANDRAKANT



Total Present No.

Notice :

Total Absent No.

Total Absent No.

# Exam Center In-Charge

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

Institute Code & Na	<b>me 2</b> 30520	Renuka Vocati	onal Training Center	
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
2404237774	230520	SATHE AKSHATA CHANDRAKANT

Photo Signature



Total Present No

Total Absent No.

Total Absent No.

# 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

Institute Code & Name	e 230520 R€	enuka Vocati	onal 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
2404237774	230520	SATHE AKSHATA CHANDRAKANT



Total Present No

Notice :

Total Absent No.

Total Absent No.

## Supervisor

Exam Center In-Charge

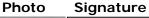
1) Student must check his course, seat no etc before sign.

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

Institute Code & Nar	ne 230520	Renuka Vocat	ional 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
2404237774	230520	SATHE AKSHATA CHANDRAKANT





Total Present No

Total Absent No.

Total Absent No.

Exam Center In-Charge

## Supervisor

Notice :

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

Institute Code & Nan	ne 230520	Renuka Vocati	onal 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
2404237774	230520	SATHE AKSHATA CHANDRAKANT





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

Institute Code & Nar	ne 230520	Renuka Vocati	onal Training Center	
Examination :	April	2024	Date: 25/05/2024	Time : 10 AM TO 1 PM
Course Code & Name : 201404 MEDICAL LAB TECHNICIAN				
Subject :	PHYSICAL BIOLOGY (BOTONY & ZOOLOGY) THEORY			

### Name Of Supervisor :

Seat No.	Institute	Name Of Student
2404237774	230520	SATHE AKSHATA CHANDRAKANT





Total Present No

Total Absent No.

Total Absent No.

# Exam Center In-Charge

### Notice :

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

office, in prescribe format by exam center In-charge

Institute Code & I	Name 230525	Renuka Vocati	ional 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
2404237775	230525	BHANDARE DATTA VISHVNATH		
2404237776	230525	RATHOD VIJAY BHANUDAS		

**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 & Nar	ne 230525	Renuka Vocati	onal Training Center	
Examination :	April	2024	Date : 25/05/2024	Time: 10 AM TO 1 PM
Course Code & Name : 201404 MEDICAL LAB TECHNICIAN				
Subject :	PHYSICAL BIOLOGY (BOTONY & ZOOLOGY) THEORY			

### Name Of Supervisor :

Seat No.	Institute	Name Of Student
2404237775	230525	BHANDARE DATTA VISHVNATH



Total Present No

Total Absent No.

Total Absent No.

#### Supervisor Notic<u>e</u>:

Exam Center In-Charge

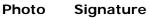
1) Student must check his course, seat no etc before sign.

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

Institute Code & Nan	ne 230530 S	AI VOCATIO	NAL TRAINING CENTE	R
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
2404237777	230530	LIKHE JAYSHREE BABASAHEB





Total Present No

Notice :

Total Absent No.

Total Absent No.

## Supervisor

Exam Center In-Charge

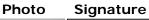
1) Student must check his course, seat no etc before sign.

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Institute Code & Nan	ne 230530 SA	I VOCATIO	NAL TRAINING CENTER	2
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
2404237777	230530	LIKHE JAYSHREE BABASAHEB





Total Present No

Notice :

Total Absent No.

Total Absent No.

## Supervisor

Exam Center In-Charge

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Institute Code & Nar	ne 230530	SAI VOCATIO	NAL TRAINING CENTE	R
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
2404237777	230530	LIKHE JAYSHREE BABASAHEB



Total Present No.

Total Absent No.

Total Absent No.

# Exam Center In-Charge

Notice :

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

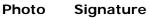
2) Any Correction in student information should be immidiatly reported to concerned district

office, in prescribe format by exam center In-charge

Institute Code & Nan	ne 230530	SAI VOCATIO	NAL TRAINING CENTE	R
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
2404237777	230530	LIKHE JAYSHREE BABASAHEB





Total Present No

Total Absent No.

Total Absent No.

Exam Center In-Charge

## Supervisor

Notice :

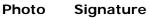
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Institute Code & Nar	ne 230530	SAI VOCATION	NAL TRAINING CENTE	R
Examination :	April	2024	Date: 30/05/2024	Time: 10 AM TO 1 PM
Course Code & Name : 201404 MEDICAL LAB TECHNICIAN				
Subject :	MICROBIOLOGY AND MEDICAL CARE THEORY			

### Name Of Supervisor :

Seat No.	Institute	Name Of Student
2404237777	230530	LIKHE JAYSHREE BABASAHEB





Total Present No

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Total Absent No.

Exam Center In-Charge

## Notice :

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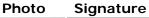
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office, in prescribe format by exam center In-charge

Institute Code & Nan	ne 230530	SAI VOCATIO	NAL TRAINING CENTE	R
Examination :	April	2024	Date: 25/05/2024	Time : 10 AM TO 1 PM
Course Code & Name : 201404 MEDICAL LAB TECHNICIAN				
Subject :	PHYSICAL BIOLOGY (BOTONY & ZOOLOGY) THEORY			

#### Name Of Supervisor :

Seat No.	Institute	Name Of Student
2404237777	230530	LIKHE JAYSHREE BABASAHEB





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