Institute Code & Name 260445 Jamanlal Goenka Paramedical Vocational Training Centre Examination: April 2024 Date: 28/05/2024 Time: 10 AM TO 1 PM

Course Code & Name: 201410 PHYSIOTHERAPIST

Subject: ANATOMY, PHYSIOLOGY AND PSYCHOLOGY THEORY

Name Of Supervisor:

Seat No.InstituteName Of StudentPI2404267778260445WATHODKAR LAXMIKANT SURESH

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 260445 Jamanlal Goenka Paramedical Vocational Training Centre Examination: April 2024 Date: 25/05/2024 Time: 10 AM TO 1 PM

Course Code & Name: 201410 PHYSIOTHERAPIST

Subject: APPLIED MATHEMATICS THEORY

Name Of Supervisor:

Seat No. Institute Name Of Student
2404267778 260445 WATHODKAR LAXMIKANT SURESH

WATHODKAR LAXMIKANT SURESH

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 260445 Jamanlal Goenka Paramedical Vocational Training Centre Examination: April 2024 Date: 27/05/2024 Time: 10 AM TO 1 PM

Course Code & Name: 201410 PHYSIOTHERAPIST

Subject: APPLIED SCIENCES (PHYSICS & CHEMISTRY) THEORY

Name Of Supervisor:

Seat No. Institute Name Of Student
2404267778 260445 WATHODKAR LAXMIKANT SURESH

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

Course Code & Name: 201410 PHYSIOTHERAPIST

Subject: ELECTROTHERAPY, BIOMECHANICS AND EXERCISE THERAPY THEORY

Name Of Supervisor:

Seat No.InstituteName Of StudentPhoto2404267778260445WATHODKAR LAXMIKANT SURESH

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 260445 Jamanlal Goenka Paramedical Vocational Training Centre Examination: April 2024 Date: 24/05/2024 Time: 10 AM TO 1 PM

Course Code & Name: 201410 PHYSIOTHERAPIST

Subject: ENGLISH (COMMUNICATION SKILL) THEORY

Name Of Supervisor:

Seat No.InstituteName Of StudentPhoto2404267778260445WATHODKAR LAXMIKANT SURESH

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 260445 Jamanlal Goenka Paramedical Vocational Training Centre Examination: April 2024 Date: 30/05/2024 Time: 10 AM TO 1 PM

Course Code & Name: 201410 PHYSIOTHERAPIST

Subject: ORTHOPAEDICS, NEUROLOGY, MEDICAL AND SURGICAL CONDITION THEORY

Name Of Supervisor :

Seat No. Institute Name Of Student Photo Signature 2404267778 260445 WATHODKAR LAXMIKANT SURESH

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.
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Course Code & Name: 201417 NATUROPATHY AND YOGIC SCIENCE

Subject: ANATOMY PHYSIOLOGY AND PATHOLOGY THEORY

Name Of Supervisor:

Seat No. Institute Name Of Student Photo Signature 2404267771 260445 GAUD SHIVANI SACHINSINGH

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

Course Code & Name: 201417 NATUROPATHY AND YOGIC SCIENCE

Subject: APPLIED MATHEMATICS THEORY

Name Of Supervisor :

Seat No. Institute Name Of Student Photo Signature 2404267771 260445 GAUD SHIVANI SACHINSINGH

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 260445 Jamanlal Goenka Paramedical Vocational Training Centre Examination: April 2024 Date: 27/05/2024 Time: 10 AM TO 1 PM

Course Code & Name: 201417 NATUROPATHY AND YOGIC SCIENCE

Subject: APPLIED SCIENCES (PHYSICS & CHEMISTRY) THEORY

Name Of Supervisor :

Seat No. Institute Name Of Student Photo Signature 2404267771 260445 GAUD SHIVANI SACHINSINGH

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 260445 Jamanlal Goenka Paramedical Vocational Training Centre 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 2404267771 260445 GAUD SHIVANI SACHINSINGH

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 260445 Jamanlal Goenka Paramedical Vocational Training Centre 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
2404267771 260445 GAUD SHIVANI SACHINSINGH

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 260445 Jamanlal Goenka Paramedical Vocational Training Centre 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.InstituteName Of StudentPhoto2404267771260445GAUD SHIVANI SACHINSINGH

GAUD SHIVANI SACHINSINGH

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

Supervisor

Exam Center In-Charge

Signature

- 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 260445 Jamanlal Goenka Paramedical Vocational Training Centre Examination: April 2024 Date: 28/05/2024 Time: 10 AM TO 1 PM

Course Code & Name: 201419 PANCHAKARMA THERAPY

Subject: ANATOMY PHYSIOLOGY AND PATHOLOGY THEORY

Name Of Supervisor:

_ _			
Seat No.	Institute	Name Of Student	Photo Signature
2404267772	260445	SHAIKH NAGURVALI MASTAN SAHEB	
2404267773	260445	SHAIKH SUBHANI SAHEB MASTAN	
2404267774	260445	PATHAN DURGAJI NAGUL MEERA	
2404267775	260445	PATTAN DADA NAGURVALI	
2404267776	260445	PATHANU NAGARJUNA RAO	
2404267777	260445	SHAIKH BIKKU SAHEB SHAIKH KHASHIM	

Total Present No.	Total Absent N	0.	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 260445 Jamanlal Goenka Paramedical Vocational Training Centre Examination: April 2024 Date: 25/05/2024 Time: 10 AM TO 1 PM

Course Code & Name: 201419 PANCHAKARMA THERAPY **Subject**: APPLIED MATHEMATICS THEORY

Name Of Supervisor:

Seat No.	Institute	Name Of Student	Photo Signature
2404267772	260445	SHAIKH NAGURVALI MASTAN SAHEB	
2404267773	260445	SHAIKH SUBHANI SAHEB MASTAN	
2404267774	260445	PATHAN DURGAJI NAGUL MEERA	
2404267775	260445	PATTAN DADA NAGURVALI	
2404267776	260445	PATHANU NAGARJUNA RAO	
2404267777	260445	SHAIKH BIKKU SAHEB SHAIKH KHASHIM	

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 260445 Jamanlal Goenka Paramedical Vocational Training Centre Examination: April 2024 Date: 27/05/2024 Time: 10 AM TO 1 PM

Course Code & Name: 201419 PANCHAKARMA THERAPY

Subject: APPLIED SCIENCES (PHYSICS & CHEMISTRY) THEORY

Name Of Supervisor :

_ _			
Seat No.	Institute	Name Of Student	Photo Signature
2404267772	260445	SHAIKH NAGURVALI MASTAN SAHEB	
2404267773	260445	SHAIKH SUBHANI SAHEB MASTAN	
2404267774	260445	PATHAN DURGAJI NAGUL MEERA	
2404267775	260445	PATTAN DADA NAGURVALI	
2404267776	260445	PATHANU NAGARJUNA RAO	
2404267777	260445	SHAIKH BIKKU SAHEB SHAIKH KHASHIM	

Total Present No.	Total Absent N	o	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 260445 Jamanlal Goenka Paramedical Vocational Training Centre Examination: April 2024 Date: 29/05/2024 Time: 10 AM TO 1 PM

Course Code & Name: 201419 PANCHAKARMA THERAPY
Subject: BASICS OF AYURVEDA THEORY

Name Of Supervisor:

Seat No.	Institute	Name Of Student	Photo Signature
2404267772	260445	SHAIKH NAGURVALI MASTAN SAHEB	
2404267773	260445	SHAIKH SUBHANI SAHEB MASTAN	
2404267774	260445	PATHAN DURGAJI NAGUL MEERA	
2404267775	260445	PATTAN DADA NAGURVALI	
2404267776	260445	PATHANU NAGARJUNA RAO	
2404267777	260445	SHAIKH BIKKU SAHEB SHAIKH KHASHIM	

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 260445 Jamanlal Goenka Paramedical Vocational Training Centre Examination: April 2024 Date: 24/05/2024 Time: 10 AM TO 1 PM

Course Code & Name: 201419 PANCHAKARMA THERAPY

Subject: ENGLISH (COMMUNICATION SKILL) THEORY

Name Of Supervisor:

Seat No.	Institute	Name Of Student	Photo Signature
2404267772	260445	SHAIKH NAGURVALI MASTAN SAHEB	
2404267773	260445	SHAIKH SUBHANI SAHEB MASTAN	
2404267774	260445	PATHAN DURGAJI NAGUL MEERA	
24042/7775	2/0445	PATTAN DADA NAGURVALI	77
2404267775	260445	PATTAN DADA NAGORVALI	
2404267776	260445	PATHANU NAGARJUNA RAO	
2404267777	260445	SHAIKH BIKKU SAHEB SHAIKH KHASHIM	

Total Present No.	То	otal Absent No.	Total Absent No.	

Supervisor

Exam Center In-Charge

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Institute Code & Name 260445 Jamanlal Goenka Paramedical Vocational Training Centre Examination: April 2024 Date: 30/05/2024 Time: 10 AM TO 1 PM

Course Code & Name: 201419 PANCHAKARMA THERAPY

Subject: PANCHAKARMA THEORY

Name Of Supervisor:

Seat No.	Institute	Name Of Student	Photo	Signature
2404267772	260445	SHAIKH NAGURVALI MASTAN SAHEB		
2404267773	260445	SHAIKH SUBHANI SAHEB MASTAN	8	
2404267774	260445	PATHAN DURGAJI NAGUL MEERA	3	
2404267775	260445	PATTAN DADA NAGURVALI		
2404267776	260445	PATHANU NAGARJUNA RAO		
2404267777	260445	SHAIKH BIKKU SAHEB SHAIKH KHASHIM		

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

Supervisor

Exam Center In-Charge

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