Institute Code & Name 330276 M G Paramedical Vocational Training Center Gondia

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
2404337771	330276	GAHANE ACHAL DNYANCHANDRA		
2404337772	330276	KATRE MAYURI RISHESHWAR		

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 330276 M G Paramedical Vocational Training Center Gondia

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
2404337771	330276	GAHANE ACHAL DNYANCHANDRA		
2404337772	330276	KATRE MAYURI RISHESHWAR		

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 330276 M G Paramedical Vocational Training Center Gondia

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
2404337771	330276	GAHANE ACHAL DNYANCHANDRA	
2404337772	330276	KATRE MAYURI RISHESHWAR	

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 330276 M G Paramedical Vocational Training Center Gondia

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

2404337772 330276 KATRE MAYURI RISHESHWAR

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 330276 M G Paramedical Vocational Training Center Gondia

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:

Institute	Name Of Student	Photo Signature
330276	GAHANE ACHAL DNYANCHANDRA	
330276	KATRE MAYURI RISHESHWAR	e e
000270		
330276	THAKRE SAKSHI VINOD	
	330276 330276	330276 GAHANE ACHAL DNYANCHANDRA 330276 KATRE MAYURI RISHESHWAR

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 330276 M G Paramedical Vocational Training Center Gondia

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

2404337772 330276 KATRE MAYURI RISHESHWAR

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 330302 Chetana Vocational Training Institute Amgaon

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.InstituteName Of StudentPhotoSignature2404337783330302KARNJEKAR UMESHKUMAR PAWANLAL

9

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 330302 Chetana Vocational Training Institute Amgaon

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. 2404337782	Institute 330302	Name Of Student KHANDARKAR SUBHASH MAYARAM	Photo	Signature
2404337783	330302	KARNJEKAR UMESHKUMAR PAWANLAL	9	
2404337784	330302	SHENDE DURGA LEKHRAM		

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 330302 Chetana Vocational Training Institute Amgaon

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. 2404337782	Institute 330302	Name Of Student KHANDARKAR SUBHASH MAYARAM	Photo	Signature
2404337783	330302	KARNJEKAR UMESHKUMAR PAWANLAL		

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 330302 Chetana Vocational Training Institute Amgaon

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
2404337783	330302	KARNJEKAR UMESHKUMAR PAWANLAL	
2404337784	330302	SHENDE DURGA LEKHRAM	

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 330302 Chetana Vocational Training Institute Amgaon

Examination: April **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. Name Of Student Institute Photo Signature KARNJEKAR UMESHKUMAR PAWANLAL 2404337783 330302

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 330302 Chetana Vocational Training Institute Amgaon

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
2404337783	330302	KARNJEKAR UMESHKUMAR PAWANLAL	9	
2404337784	330302	SHENDE DURGA LEKHRAM		

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 330307 Laxmibai Vocational Training Center

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

Course Code & Name: 305403 AGRICULTURAL TECHNOLOGY

Subject: AGRICULTURE ECONOMICS AND EXTENSION THEORY

Name Of Supervisor:

Seat No.	Institute	Name Of Student	Photo Signature
2404337774	330307	KATRE YOGESHWARI DINESH	
2404337776	330307	DONODE GHANSHYAM GOWARDHAN	
2404337778	330307	BHANDARKAR VINOD DHANRAJ	
2404337779	330307	KAPGATE RAMCHAND MORESHWAR	

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 330307 Laxmibai Vocational Training Center

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

Course Code & Name: 305403 AGRICULTURAL TECHNOLOGY

Subject: APPLIED SCIENCES (PHYSICS & CHEMISTRY) THEORY

Name Of Supervisor:

Seat No.	Institute	Name Of Student	Photo Signature
2404337774	330307	KATRE YOGESHWARI DINESH	
2404337778	330307	BHANDARKAR VINOD DHANRAJ	
2404337779	330307	KAPGATE RAMCHAND MORESHWAR	

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 330307 Laxmibai Vocational Training Center

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

Course Code & Name: 305403 AGRICULTURAL TECHNOLOGY Subject: COMPUTER APPLICATION THEORY

Name Of Supervisor:

Seat No. Name Of Student Signature Institute Photo 2404337776 330307 DONODE GHANSHYAM GOWARDHAN

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 330307 Laxmibai Vocational Training Center

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

Course Code & Name: 305403 AGRICULTURAL TECHNOLOGY

Subject: CULTIVATION OF AGRONOMICAL CROPS THEORY

Name Of Supervisor:

Seat No.	Institute	Name Of Student	Photo Signature
2404337774	330307	KATRE YOGESHWARI DINESH	
2404337776	330307	DONODE GHANSHYAM GOWARDHAN	
2404337778	330307	BHANDARKAR VINOD DHANRAJ	
2404337779	330307	KAPGATE RAMCHAND MORESHWAR	

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 330307 Laxmibai Vocational Training Center

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

Course Code & Name: 305403 AGRICULTURAL TECHNOLOGY **Subject**: ELEMENTS OF AGRICULTURE THEORY

Name Of Supervisor:

Seat No.	Institute	Name Of Student	Photo Signature
2404337774	330307	KATRE YOGESHWARI DINESH	
2404337776	330307	DONODE GHANSHYAM GOWARDHAN	
2404337778	330307	BHANDARKAR VINOD DHANRAJ	
2404337779	330307	KAPGATE RAMCHAND MORESHWAR	

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 330307 Laxmibai Vocational Training Center

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

Course Code & Name: 305403 AGRICULTURAL TECHNOLOGY

Subject: ENGLISH (COMMUNICATION SKILL) THEORY

Name Of Supervisor:

Seat No.	Institute	Name Of Student	Photo Signature
2404337774	330307	KATRE YOGESHWARI DINESH	
2404337776	330307	DONODE GHANSHYAM GOWARDHAN	
2404337778	330307	BHANDARKAR VINOD DHANRAJ	
2404337779	330307	KAPGATE RAMCHAND MORESHWAR	

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 330307 Laxmibai Vocational Training Center

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

Course Code & Name: 305403 AGRICULTURAL TECHNOLOGY

Subject: ENTREPRENEURSHIP THEORY

Name Of Supervisor:

Seat No. Institute Name Of Student Photo Sig

2404337776 330307 DONODE GHANSHYAM GOWARDHAN

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 330307 Laxmibai Vocational Training Center

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

Course Code & Name: 305403 AGRICULTURAL TECHNOLOGY

Subject: PHYSICAL BIOLOGY(BOTONY & ZOOLOGY) THEORY

Name Of Supervisor:

Seat No.	Institute	Name Of Student	Photo Signature
2404337774	330307	KATRE YOGESHWARI DINESH	
2404337778	330307	BHANDARKAR VINOD DHANRAJ	
2404337779	330307	KAPGATE RAMCHAND MORESHWAR	

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 330313 Nirmal Institute Of Paramedical And 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
2404337780	330313	BANGADKAR DIPALI PRAMOD	
2404337781	330313	WASNIK ROHIT FANIL	

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 330313 Nirmal Institute Of Paramedical And 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
2404337780	330313	BANGADKAR DIPALI PRAMOD		
2404337781	330313	WASNIK ROHIT FANIL		

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 330313 Nirmal Institute Of Paramedical And 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
2404337780	330313	BANGADKAR DIPALI PRAMOD	
2404337781	330313	WASNIK ROHIT FANIL	

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 330313 Nirmal Institute Of Paramedical And 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
2404337780	330313	BANGADKAR DIPALI PRAMOD		
2404337781	330313	WASNIK ROHIT FANIL		

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 330313 Nirmal Institute Of Paramedical And 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
2404337780	330313	BANGADKAR DIPALI PRAMOD	
2404337781	330313	WASNIK ROHIT FANIL	

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 330313 Nirmal Institute Of Paramedical And Vocational 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	Photo Signature
2404337780	330313	BANGADKAR DIPALI PRAMOD	
2404337781	330313	WASNIK ROHIT FANIL	

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