Institute Code & Name :170541 Samarth Vocational Training Center

Examination: April 2024 Date: 29/04/2024 Time: 2 PM TO 5 PM

Course Code & Name: 302409 ELECTRICIAN

BASIC ELECTRICITY AND MEASUREMENT PRACTICAL Subject:

Name Of Supervisor:

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

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 :170541 Samarth Vocational Training Center

Examination: April 2024 **Date**: 30/04/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 302409 ELECTRICIAN

Subject: BUSINESS ECONOMICS PRACTICAL

Name Of Supervisor:

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

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 :170541 Samarth Vocational Training Center

Examination: April 2024 **Date**: 02/05/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 302409 ELECTRICIAN

Subject: COMPUTER APPLICATION PRACTICAL

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 Abse	ent 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**: 30/04/2024 **Time**: 2 PM TO 5 PM

Course Code & Name: 302409 ELECTRICIAN

Subject: ELECTRICIAN PRACTICE PRACTICAL

Name Of Supervisor:

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

9

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 :170541 Samarth Vocational Training Center

Examination: April 2024 **Date**: 29/04/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 302409 ELECTRICIAN

Subject: ENGLISH (COMMUNICATION SKILL) PRACTICAL

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.	

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**: 02/05/2024 **Time**: 2 PM TO 5 PM

Course Code & Name: 302409 ELECTRICIAN

Subject: WORKSHOP CALCULATION, SCIENCE AND DRAWING PRACTICAL

Name Of Supervisor:

Seat No. Institute Name Of Student

2404177786 170541 GULVE AJINATH SAMADHAN

Photo Sign

Signature

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 :170543 Shree Sai Paramedical Vocational Training Center

Examination: April 2024 **Date**: 29/04/2024 **Time**: 2 PM TO 5 PM

Course Code & Name: 201404 MEDICAL LAB TECHNICIAN

Subject: ANATOMY PHYSIOLOGY AND PATHOLOGY PRACTICAL

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.	

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**: 30/04/2024 **Time**: 2 PM TO 5 PM

Course Code & Name: 201404 MEDICAL LAB TECHNICIAN

Subject: BIOCHEMISTRY PRACTICAL

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.	

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**: 30/04/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 201404 MEDICAL LAB TECHNICIAN

Subject: BUSINESS ECONOMICS PRACTICAL

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.	

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**: 02/05/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 201404 MEDICAL LAB TECHNICIAN

Subject: COMPUTER APPLICATION PRACTICAL

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**: 29/04/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 201404 MEDICAL LAB TECHNICIAN

Subject: ENGLISH (COMMUNICATION SKILL) PRACTICAL

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.	

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**: 02/05/2024 **Time**: 2 PM TO 5 PM

Course Code & Name: 201404 MEDICAL LAB TECHNICIAN

Subject: MICROBIOLOGY AND MEDICAL CARE PRACTICAL

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.	

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**: 29/04/2024 **Time**: 2 PM TO 5 PM

Course Code & Name: 201404 MEDICAL LAB TECHNICIAN

Subject: ANATOMY PHYSIOLOGY AND PATHOLOGY PRACTICAL

Name Of Supervisor :

Seat No. Institute Name Of Student

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**: 30/04/2024 **Time**: 2 PM TO 5 PM

Course Code & Name: 201404 MEDICAL LAB TECHNICIAN

Subject: BIOCHEMISTRY PRACTICAL

Name Of Supervisor:

Seat No. Institute Name Of Student

2404177793 170547 PANDAV VISHAL SUBHASH

Total Present No	Total Absent No.	Total Absent No.	

Supervisor

Exam Center In-Charge

Signature

Photo

- 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**: 02/05/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 201404 MEDICAL LAB TECHNICIAN

Subject: COMPUTER APPLICATION PRACTICAL

Name Of Supervisor:

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

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 :170547 Padmavati Vocational Training Center

Examination: April 2024 **Date**: 29/04/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 201404 MEDICAL LAB TECHNICIAN

Subject: ENGLISH (COMMUNICATION SKILL) PRACTICAL

Name Of Supervisor:

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

9

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**: 02/05/2024 **Time**: 2 PM TO 5 PM

Course Code & Name: 201404 MEDICAL LAB TECHNICIAN

Subject: MICROBIOLOGY AND MEDICAL CARE PRACTICAL

Name Of Supervisor:

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

Photo Sig

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**: 30/04/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 201404 MEDICAL LAB TECHNICIAN

Subject: PSYCHOLOGY PRACTICAL

Name Of Supervisor:

Seat No.InstituteName Of StudentPhotoSignature2404177793170547PANDAV 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 :170553 Pepals Vocational Training Center Waluj

Examination: April 2024 **Date**: 29/04/2024 **Time**: 2 PM TO 5 PM

Course Code & Name: 302409 ELECTRICIAN

Subject: BASIC ELECTRICITY AND MEASUREMENT PRACTICAL

Name Of Supervisor :

Seat No.InstituteName Of StudentPhotoSignature2404177775170553PATHAN ASHRAF HARUN

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**: 30/04/2024 **Time**: 2 PM TO 5 PM

Course Code & Name: 302409 ELECTRICIAN

Subject: ELECTRICIAN PRACTICE PRACTICAL

Name Of Supervisor:

Seat No. Institute Name Of Student 2404177775 170553 PATHAN ASHRAF HARUN 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**: 02/05/2024 **Time**: 2 PM TO 5 PM

Course Code & Name: 302409 ELECTRICIAN

Subject: WORKSHOP CALCULATION, SCIENCE AND DRAWING PRACTICAL

Name Of Supervisor:

Seat No. Institute Name Of Student 2404177775 170553 PATHAN ASHRAF HARUN 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**: 29/04/2024 **Time**: 2 PM TO 5 PM

Course Code & Name: 201417 NATUROPATHY AND YOGIC SCIENCE

Subject: ANATOMY PHYSIOLOGY AND PATHOLOGY PRACTICAL

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**: 02/05/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 201417 NATUROPATHY AND YOGIC SCIENCE

Subject: COMPUTER APPLICATION PRACTICAL

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: 29/04/2024 Time: 10 AM TO 1 PM

Course Code & Name: 201417 NATUROPATHY AND YOGIC SCIENCE Subject: ENGLISH (COMMUNICATION SKILL) PRACTICAL

Name Of Supervisor:

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

Photo

Signature

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8	-	5		
N				

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**: 30/04/2024 Time: 2 PM TO 5 PM

Course Code & Name: 201417 NATUROPATHY AND YOGIC SCIENCE Subject: PRACTICE IN NATUROPATHY PRACTICAL

Name Of Supervisor:

Seat No. Name Of Student Institute

2404177795 170637 SAYYAD VASIM ALI YAKUB ALI Photo

Signature

8-6	
2	

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**: 30/04/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 201417 NATUROPATHY AND YOGIC SCIENCE

Subject: PSYCHOLOGY PRACTICAL

Name Of Supervisor:

Seat No. Institute Name Of Student

2404177795 170637 SAYYAD VASIM ALI YAKUB ALI

Photo

Signature

3	
19	

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**: 02/05/2024 **Time**: 2 PM TO 5 PM

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

Name Of Supervisor:

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

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**: 29/04/2024 **Time**: 2 PM TO 5 PM

Course Code & Name: 302409 ELECTRICIAN

Subject: BASIC ELECTRICITY AND MEASUREMENT PRACTICAL

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.
- 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**: 02/05/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 302409 ELECTRICIAN

Subject: COMPUTER APPLICATION PRACTICAL

Name Of Supervisor :

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

Photo Sign

Signature

Total Present No.	Total Absent No.	Total Absent No.
	<u> </u>	

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**: 30/04/2024 **Time**: 2 PM TO 5 PM

Course Code & Name: 302409 ELECTRICIAN

Subject: ELECTRICIAN PRACTICE PRACTICAL

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.
- 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**: 29/04/2024 **Time**: 10 AM TO 1 PM

Course Code & Name: 302409 ELECTRICIAN

Subject: ENGLISH (COMMUNICATION SKILL) PRACTICAL

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.
- 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**: 30/04/2024 **Time**: 10 AM TO 1 PM

Course Code & Name : 302409 ELECTRICIAN

Subject : PSYCHOLOGY PRACTICAL

Name Of Supervisor :

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

Photo Sig

Signature

Total Present No.	Total Absent No.	Total Absent No.
	<u> </u>	

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**: 02/05/2024 Time: 2 PM TO 5 PM

Course Code & Name: 302409 ELECTRICIAN

Subject: WORKSHOP CALCULATION, SCIENCE AND DRAWING PRACTICAL

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.	

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