




**Maharashtra State Board Of Skill, Vocational Education & Training, Mumbai**  
**Attendance Sheet**

**Institute Code & Name** 330276 M G Paramedical Vocational Training Center Gondia  
**Examination :** August 2023 **Date :** 01/09/2023 **Time :** 2 PM TO 5 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
2308337771	330276	GAHANE ACHAL DNYANCHANDRA		<input type="text"/>
2308337772	330276	KATRE MAYURI RISHESHWAR		<input type="text"/>
2308337775	330276	BHAGAT KARISHMA SUKHADAS		<input type="text"/>

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

**Supervisor**

**Exam Center In-Charge**



**Notice :**

- 1) Student must check his course, seat no etc before sign.
- 2) Any Correction in student information should be immediately reported to concerned district office, in prescribe format by exam center In-charge

**Maharashtra State Board Of Skill, Vocational Education & Training, Mumbai**  
**Attendance Sheet**

**Institute Code & Name** 330276 M G Paramedical Vocational Training Center Gondia  
**Examination :** August 2023 **Date :** 01/09/2023 **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
2308337771	330276	GAHANE ACHAL DNYANCHANDRA		<input type="text"/>
2308337772	330276	KATRE MAYURI RISHESHWAR		<input type="text"/>

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

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**Supervisor**

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**Attendance Sheet**

**Institute Code & Name** 330276 M G Paramedical Vocational Training Center Gondia  
**Examination :** August 2023 **Date :** 02/09/2023 **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
2308337771	330276	GAHANE ACHAL DNYANCHANDRA		<input type="text"/>
2308337772	330276	KATRE MAYURI RISHESHWAR		<input type="text"/>
2308337775	330276	BHAGAT KARISHMA SUKHADAS		<input type="text"/>

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

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**Attendance Sheet**

**Institute Code & Name** 330276 M G Paramedical Vocational Training Center Gondia  
**Examination :** August 2023 **Date :** 31/08/2023 **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
2308337771	330276	GAHANE ACHAL DNYANCHANDRA		<input type="text"/>
2308337772	330276	KATRE MAYURI RISHESHWAR		<input type="text"/>
2308337775	330276	BHAGAT KARISHMA SUKHADAS		<input type="text"/>

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**Attendance Sheet**

**Institute Code & Name** 330276 M G Paramedical Vocational Training Center Gondia  
**Examination :** August 2023 **Date :** 02/09/2023 **Time :** 2 PM TO 5 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
2308337771	330276	GAHANE ACHAL DNYANCHANDRA		<input type="text"/>
2308337772	330276	KATRE MAYURI RISHESHWAR		<input type="text"/>
2308337777	330276	THAKRE SAKSHI VINOD		<input type="text"/>

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

**Supervisor**

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**Examination :** August 2023 **Date :** 31/08/2023 **Time :** 2 PM TO 5 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
2308337771	330276	GAHANE ACHAL DNYANCHANDRA		<input type="text"/>
2308337772	330276	KATRE MAYURI RISHESHWAR		<input type="text"/>
2308337773	330276	RAHANGDALE CHANDAN CHHOTELAL		<input type="text"/>
2308337774	330276	LILHARE MITHILESH MANOHAR		<input type="text"/>
2308337775	330276	BHAGAT KARISHMA SUKHADAS		<input type="text"/>
2308337776	330276	HORE ASTHA TULARAM		<input type="text"/>

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

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**Maharashtra State Board Of Skill, Vocational Education & Training, Mumbai**  
**Attendance Sheet**



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**Institute Code & Name** 330302 Chetana Vocational Training Institute Amgaon  
**Examination :** August 2023 **Date :** 02/09/2023 **Time :** 10 AM TO 1 PM  
**Course Code & Name :** 201404 MEDICAL LAB TECHNICIAN  
**Subject :** BIOCHEMISTRY THEORY

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**Name Of Supervisor :**

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Seat No.	Institute	Name Of Student	Photo	Signature
2308337778	330302	KHANDARKAR SUBHASH MAYARAM		<input type="text"/>
2308337779	330302	KATRE SHITAL GUNNILAL		<input type="text"/>

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

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**Supervisor**

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**Attendance Sheet**


**Institute Code & Name** 330302 Chetana Vocational Training Institute Amgaon

**Examination :** August 2023 **Date :** 01/09/2023 **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
2308337778	330302	KHANDARKAR SUBHASH MAYARAM		<input type="text"/>

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

\_\_\_\_\_  
**Supervisor**

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**Maharashtra State Board Of Skill, Vocational Education & Training, Mumbai**  
**Attendance Sheet**

**Institute Code & Name** 330317 Shree Chatrapati Shivaji Maharaj Vocational Training Center  
**Examination :** August 2023 **Date :** 31/08/2023 **Time :** 2 PM TO 5 PM  
**Course Code & Name :** 201404 MEDICAL LAB TECHNICIAN  
**Subject :** PSYCHOLOGY THEORY

**Name Of Supervisor :**

Seat No.	Institute	Name Of Student	Photo	Signature
2308337780	330317	SHAHARE SWAPNSHIL JAYENDRA		

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

\_\_\_\_\_  
**Supervisor**

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