


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

Center Code & Name : 130345 Divyasparsi Vocational Training Center
Examination : October 2023 **Date :** 31/10/2023 **Time :** (FOR 100 MARKS
Course Code & Name : 201208 YOGA & NATUROTHERAPY
Subject : ANATOMY, PHYSIOLOGY AND PATHOLOGY 20120821 PRACTICAL

Name Of Supervisor :

Enrolment No.	Institute	Name Of Student	Photo	Signature
2107213034	130345	SHETKAR SHUBHLAXMI ANKUSH		<input type="text"/>
Seat No. 2310130002				

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

Center Code & Name : 130345 Divyaspārshi Vocational Training Center
Examination : October 2023 **Date :** 01/11/2023 **Time :** (FOR 100 MARKS
Course Code & Name : 201208 YOGA & NATUROTHERAPY
Subject : NATUROPATHY AND DIET 20120822 PRACTICAL

Name Of Supervisor :

Enrolment No.	Institute	Name Of Student	Photo	Signature
2107213034	130345	SHETKAR SHUBHLAXMI ANKUSH		<input type="text"/>
Seat No. 2310130002				

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

Center Code & Name : 130345 Divyasparsi Vocational Training Center
Examination : October 2023 **Date :** 02/11/2023 **Time :** (FOR 100 MARKS
Course Code & Name : 201208 YOGA & NATUROTHERAPY
Subject : PRACTICAL YOGA 20120823 PRACTICAL

Name Of Supervisor :

Enrolment No.	Institute	Name Of Student	Photo	Signature
2107213034	130345	SHETKAR SHUBHLAXMI ANKUSH		<input type="text"/>
Seat No. 2310130002				

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

Supervisor

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