PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 114 / PLUMBER

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88209123421001	BALJINDER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 128 / FITTER

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88227223422002	BALJEET SINGH		
2	88227223422004	DEEPAK SINGH		
3	88227223422005	GURPREET SINGH		
4	88227223422007	HARDEEP SINGH		
5	88227223422008	HARMANDEEP SINGH		
6	88227223422011	JASPAL SINGH		
7	88227223422012	JASPREET SINGH		
8	88227223422013	KAMALDEEP SINGH		
9	88227223422015	NITVIR SINGH BADWAL		
10	88227223422017	PARNEET SINGH		
11	88227223422018	PARWINDER SINGH		
12	88227223422020	VISHAL KUMAR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 128 / FITTER

Class: First

Subject : 44431 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 128 / FITTER

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88227223422002	BALJEET SINGH		
2	88227223422004	DEEPAK SINGH		
3	88227223422005	GURPREET SINGH		
4	88227223422007	HARDEEP SINGH		
5	88227223422008	HARMANDEEP SINGH		
6	88227223422011	JASPAL SINGH		
7	88227223422012	JASPREET SINGH		
8	88227223422013	KAMALDEEP SINGH		
9	88227223422015	NITVIR SINGH BADWAL		
10	88227223422017	PARNEET SINGH		
11	88227223422018	PARWINDER SINGH		
12	88227223422020	VISHAL KUMAR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 128 / FITTER

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 128 / FITTER

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88227223422002	BALJEET SINGH		
2	88227223422004	DEEPAK SINGH		
3	88227223422005	GURPREET SINGH		
4	88227223422007	HARDEEP SINGH		
5	88227223422008	HARMANDEEP SINGH		
6	88227223422011	JASPAL SINGH		
7	88227223422012	JASPREET SINGH		
8	88227223422013	KAMALDEEP SINGH		
9	88227223422015	NITVIR SINGH BADWAL		
10	88227223422017	PARNEET SINGH		
11	88227223422018	PARWINDER SINGH		
12	88227223422020	VISHAL KUMAR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 128 / FITTER

Class: First

Subject : 44435 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 194 / INDUSTRIAL PAINTER

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88278110122001	ABHISHEK MEHRA		
2	88278110122005	BOBBY PASVAN		
3	88278110122006	GAGANDEEP SINGH		
4	88278110122009	GURWINDERPAL SINGH		
5	88278110122010	HARMANPREET SINGH		
6	88278110122013	JASWINDER SINGH		
7	88278110122014	KARAN DHARIWAL		
8	88278110122016	MOHITPREET SINGH		
9	88278110122017	NAVDEEP KUMAR		
10	88278110122019	PRABHNOOR SINGH		
11	88278110122020	RAJ KUMAR		
12	88278110122023	SIKANDAR SHARMA		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 194 / INDUSTRIAL PAINTER

Class: First

Subject : 44431 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 194 / INDUSTRIAL PAINTER

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88278110122001	ABHISHEK MEHRA		
2	88278110122005	BOBBY PASVAN		
3	88278110122006	GAGANDEEP SINGH		
4	88278110122009	GURWINDERPAL SINGH		
5	88278110122010	HARMANPREET SINGH		
6	88278110122013	JASWINDER SINGH		
7	88278110122014	KARAN DHARIWAL		
8	88278110122016	MOHITPREET SINGH		
9	88278110122017	NAVDEEP KUMAR		
10	88278110122019	PRABHNOOR SINGH		
11	88278110122020	RAJ KUMAR		
12	88278110122023	SIKANDAR SHARMA		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 194 / INDUSTRIAL PAINTER

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 194 / INDUSTRIAL PAINTER

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88278110122001	ABHISHEK MEHRA		
2	88278110122005	BOBBY PASVAN		
3	88278110122006	GAGANDEEP SINGH		
4	88278110122009	GURWINDERPAL SINGH		
5	88278110122010	HARMANPREET SINGH		
6	88278110122013	JASWINDER SINGH		
7	88278110122014	KARAN DHARIWAL		
8	88278110122016	MOHITPREET SINGH		
9	88278110122017	NAVDEEP KUMAR		
10	88278110122019	PRABHNOOR SINGH		
11	88278110122020	RAJ KUMAR		
12	88278110122023	SIKANDAR SHARMA		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 194 / INDUSTRIAL PAINTER

Class: First

Subject : 44435 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 268 / WELDER (GMAW AND GTAW) Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88268123422021	AMANDEEP SINGH		
2	88268123422022	AMANJOT SINGH		
3	88268123422023	ARJUN KUMAR		
4	88268123422024	BARSHPREET SINGH		
5	88268123422027	GAGANDEEP SINGH		
6	88268123422028	GOURAV CHOUDHARY		
7	88268123422030	HARDEEP SINGH		
8	88268123422032	KHUSHPREET SINGH		
9	88268123422034	MANPREET SINGH		
10	88268123422037	SAMEER KUMAR		
11	88268123422039	SATISH KUMAR		
12	88268123422040	UMESH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 268 / WELDER (GMAW AND GTAW) Class: First

Subject : 44431 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 268 / WELDER (GMAW AND GTAW) Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88268123422021	AMANDEEP SINGH		
2	88268123422022	AMANJOT SINGH		
3	88268123422023	ARJUN KUMAR		
4	88268123422024	BARSHPREET SINGH		
5	88268123422027	GAGANDEEP SINGH		
6	88268123422028	GOURAV CHOUDHARY		
7	88268123422030	HARDEEP SINGH		
8	88268123422032	KHUSHPREET SINGH		
9	88268123422034	MANPREET SINGH		
10	88268123422037	SAMEER KUMAR		
11	88268123422039	SATISH KUMAR		
12	88268123422040	UMESH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 268 / WELDER (GMAW AND GTAW) Class: First

Subject : 44434 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 268 / WELDER (GMAW AND GTAW) Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88268123422021	AMANDEEP SINGH		
2	88268123422022	AMANJOT SINGH		
3	88268123422023	ARJUN KUMAR		
4	88268123422024	BARSHPREET SINGH		
5	88268123422027	GAGANDEEP SINGH		
6	88268123422028	GOURAV CHOUDHARY		
7	88268123422030	HARDEEP SINGH		
8	88268123422032	KHUSHPREET SINGH		
9	88268123422034	MANPREET SINGH		
10	88268123422037	SAMEER KUMAR		
11	88268123422039	SATISH KUMAR		
12	88268123422040	UMESH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 268 / WELDER (GMAW AND GTAW) Class: First

Subject : 44435 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 658 / SEWING TECHNOLOGY

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88247110322001	ANCHAL RANI		
2	88247110322002	GURPREET KAUR		
3	88247110322003	GURWINDER KAUR		
4	88247110322004	JAPKIRAT KAUR		
5	88247110322005	JASPREET KAUR		
6	88247110322007	NAJMA		
7	88247110322009	NAVNEET KAUR		
8	88247110322010	POOJA RANI		
9	88247110322011	SARABJEET KAUR		
10	88247110322012	SARDARA BEGAM		
11	88247110322013	SARPREET KAUR		
12	88247110322015	TANPREET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 658 / SEWING TECHNOLOGY

Class: First

Subject : 44431 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 658 / SEWING TECHNOLOGY

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88247110322001	ANCHAL RANI		
2	88247110322002	GURPREET KAUR		
3	88247110322003	GURWINDER KAUR		
4	88247110322004	JAPKIRAT KAUR		
5	88247110322005	JASPREET KAUR		
6	88247110322007	NAJMA		
7	88247110322009	NAVNEET KAUR		
8	88247110322010	POOJA RANI		
9	88247110322011	SARABJEET KAUR		
10	88247110322012	SARDARA BEGAM		
11	88247110322013	SARPREET KAUR		
12	88247110322015	TANPREET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 658 / SEWING TECHNOLOGY

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 658 / SEWING TECHNOLOGY

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88247110322001	ANCHAL RANI		
2	88247110322002	GURPREET KAUR		
3	88247110322003	GURWINDER KAUR		
4	88247110322004	JAPKIRAT KAUR		
5	88247110322005	JASPREET KAUR		
6	88247110322007	NAJMA		
7	88247110322009	NAVNEET KAUR		
8	88247110322010	POOJA RANI		
9	88247110322011	SARABJEET KAUR		
10	88247110322012	SARDARA BEGAM		
11	88247110322013	SARPREET KAUR		
12	88247110322015	TANPREET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 658 / SEWING TECHNOLOGY

Class: First

Subject : 44435 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 660 / WELDER

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88212110321022	DALJEET SINGH		
2	88212110321028	GURWINDER SINGH		
3	88212110321038	RAVINDER SINGH		
4	88212110322020	ARSHDEEP SINGH		
5	88212110322022	GURSEWAK SINGH		
6	88212110322026	JASWINDER SINGH		
7	88212110322028	KHUSHPREET SINGH		
8	88212110322029	LOVEPREET SINGH		
9	88212110322033	PARAMVIR SINGH		
10	88212110322034	SUKHWINDER SINGH		
11	88212110322035	VISHAL SHARMA		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 660 / WELDER

Class: First

Subject : 44431 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 660 / WELDER

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88212110322020	ARSHDEEP SINGH		
2	88212110322022	GURSEWAK SINGH		
3	88212110322026	JASWINDER SINGH		
4	88212110322028	KHUSHPREET SINGH		
5	88212110322029	LOVEPREET SINGH		
6	88212110322033	PARAMVIR SINGH		
7	88212110322034	SUKHWINDER SINGH		
8	88212110322035	VISHAL SHARMA		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 660 / WELDER

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88212110322020	ARSHDEEP SINGH		
2	88212110322022	GURSEWAK SINGH		
3	88212110322026	JASWINDER SINGH		
4	88212110322028	KHUSHPREET SINGH		
5	88212110322029	LOVEPREET SINGH		
6	88212110322033	PARAMVIR SINGH		
7	88212110322034	SUKHWINDER SINGH		
8	88212110322035	VISHAL SHARMA		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 664 / PUNJABI STENOGRAPHY

Class: First

Subject : 17411 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88174110122025	AMRIT		
2	88174110122026	AMRITPAL SINGH		
3	88174110122027	GURPREET KAUR		
4	88174110122028	HARPREET KAUR		
5	88174110122029	HARPREET KAUR		
6	88174110122030	HARSHPREET SINGH		
7	88174110122031	HARWINDER KAUR		
8	88174110122032	JASHANDEEP SINGH		
9	88174110122033	JASVIR KAUR		
10	88174110122034	KHUSHVEER SINGH		
11	88174110122035	KIRANDEEP KAUR		
12	88174110122036	KIRTI CHAUHAN		
13	88174110122037	MANPREET KAUR		
14	88174110122038	NARINDER KAUR		
15	88174110122039	RAJPREET KAUR		
16	88174110122040	RAVINDER SINGH		
17	88174110122041	SIMRANJEET SINGH		
18	88174110122042	SIMRANJEET SINGH		
19	88174110122044	STEFANPREET SINGH		
20	88174120622001	AMANDEEP KAUR		
21	88174120622002	AMANDEEP KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 664 / PUNJABI STENOGRAPHY

Class: First

Subject : 17411 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88174120622004	CHARANPREET KAUR		
23	88174120622005	DEEPIKA		
24	88174120622006	HARPREET KAUR		
25	88174120622007	JASPREET KAUR		
26	88174120622008	KIRAN KAUR		
27	88174120622009	KIRANJOT KAUR		
28	88174120622010	KOMALPREET KAUR		
29	88174120622011	LOVEPREET KAUR		
30	88174120622012	NGEETA RANI		
31	88174120622013	PARMINDER KAUR		
32	88174120622014	RAJO KAUR		
33	88174120622015	RAMANDEEP KAUR		
34	88174120622016	RAMNEET KAUR		
35	88174120622017	SHABNAMPREET KAUR		
36	88174120622018	SIMRANJEET KAUR		
37	88174120622019	SUKHWINDER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 664 / PUNJABI STENOGRAPHY Class: First

Subject : 17411 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 664 / PUNJABI STENOGRAPHY

Class: First

Subject : 17414 / SOCIAL STUDIES

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88174110121007	HARMANDEEP SINGH		
2	88174110122025	AMRIT		
3	88174110122026	AMRITPAL SINGH		
4	88174110122027	GURPREET KAUR		
5	88174110122028	HARPREET KAUR		
6	88174110122029	HARPREET KAUR		
7	88174110122030	HARSHPREET SINGH		
8	88174110122031	HARWINDER KAUR		
9	88174110122032	JASHANDEEP SINGH		
10	88174110122033	JASVIR KAUR		
11	88174110122034	KHUSHVEER SINGH		
12	88174110122035	KIRANDEEP KAUR		
13	88174110122036	KIRTI CHAUHAN		
14	88174110122037	MANPREET KAUR		
15	88174110122038	NARINDER KAUR		
16	88174110122039	RAJPREET KAUR		
17	88174110122040	RAVINDER SINGH		
18	88174110122041	SIMRANJEET SINGH		
19	88174110122042	SIMRANJEET SINGH		
20	88174110122044	STEFANPREET SINGH		
21	88174120622001	AMANDEEP KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 664 / PUNJABI STENOGRAPHY

Class: First

Subject : 17414 / SOCIAL STUDIES

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88174120622002	AMANDEEP KAUR		
23	88174120622004	CHARANPREET KAUR		
24	88174120622005	DEEPIKA		
25	88174120622006	HARPREET KAUR		
26	88174120622007	JASPREET KAUR		
27	88174120622008	KIRAN KAUR		
28	88174120622009	KIRANJOT KAUR		
29	88174120622010	KOMALPREET KAUR		
30	88174120622011	LOVEPREET KAUR		
31	88174120622012	NGEETA RANI		
32	88174120622013	PARMINDER KAUR		
33	88174120622014	RAJO KAUR		
34	88174120622015	RAMANDEEP KAUR		
35	88174120622016	RAMNEET KAUR		
36	88174120622017	SHABNAMPREET KAUR		
37	88174120622018	SIMRANJEET KAUR		
38	88174120622019	SUKHWINDER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 664 / PUNJABI STENOGRAPHY Class: First

Subject : 17414 / SOCIAL STUDIES

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 664 / PUNJABI STENOGRAPHY

Class: First

Subject : 17415 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88174110122025	AMRIT		
2	88174110122026	AMRITPAL SINGH		
3	88174110122027	GURPREET KAUR		
4	88174110122028	HARPREET KAUR		
5	88174110122029	HARPREET KAUR		
6	88174110122030	HARSHPREET SINGH		
7	88174110122031	HARWINDER KAUR		
8	88174110122032	JASHANDEEP SINGH		
9	88174110122033	JASVIR KAUR		
10	88174110122034	KHUSHVEER SINGH		
11	88174110122035	KIRANDEEP KAUR		
12	88174110122036	KIRTI CHAUHAN		
13	88174110122037	MANPREET KAUR		
14	88174110122038	NARINDER KAUR		
15	88174110122039	RAJPREET KAUR		
16	88174110122040	RAVINDER SINGH		
17	88174110122041	SIMRANJEET SINGH		
18	88174110122042	SIMRANJEET SINGH		
19	88174110122044	STEFANPREET SINGH		
20	88174120622001	AMANDEEP KAUR		
21	88174120622002	AMANDEEP KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 664 / PUNJABI STENOGRAPHY

Class: First

Subject : 17415 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88174120622004	CHARANPREET KAUR		
23	88174120622005	DEEPIKA		
24	88174120622006	HARPREET KAUR		
25	88174120622007	JASPREET KAUR		
26	88174120622008	KIRAN KAUR		
27	88174120622009	KIRANJOT KAUR		
28	88174120622010	KOMALPREET KAUR		
29	88174120622011	LOVEPREET KAUR		
30	88174120622012	NGEETA RANI		
31	88174120622013	PARMINDER KAUR		
32	88174120622014	RAJO KAUR		
33	88174120622015	RAMANDEEP KAUR		
34	88174120622016	RAMNEET KAUR		
35	88174120622017	SHABNAMPREET KAUR		
36	88174120622018	SIMRANJEET KAUR		
37	88174120622019	SUKHWINDER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 664 / PUNJABI STENOGRAPHY Class: First

Subject : 17415 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 664 / PUNJABI STENOGRAPHY

Class: First

Subject : 17416 / COGNATE

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88174110122025	AMRIT		
2	88174110122026	AMRITPAL SINGH		
3	88174110122027	GURPREET KAUR		
4	88174110122028	HARPREET KAUR		
5	88174110122029	HARPREET KAUR		
6	88174110122030	HARSHPREET SINGH		
7	88174110122031	HARWINDER KAUR		
8	88174110122032	JASHANDEEP SINGH		
9	88174110122033	JASVIR KAUR		
10	88174110122034	KHUSHVEER SINGH		
11	88174110122035	KIRANDEEP KAUR		
12	88174110122036	KIRTI CHAUHAN		
13	88174110122037	MANPREET KAUR		
14	88174110122038	NARINDER KAUR		
15	88174110122039	RAJPREET KAUR		
16	88174110122040	RAVINDER SINGH		
17	88174110122041	SIMRANJEET SINGH		
18	88174110122042	SIMRANJEET SINGH		
19	88174110122044	STEFANPREET SINGH		
20	88174120622001	AMANDEEP KAUR		
21	88174120622002	AMANDEEP KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 664 / PUNJABI STENOGRAPHY

Class: First

Subject : 17416 / COGNATE

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88174120622004	CHARANPREET KAUR		
23	88174120622005	DEEPIKA		
24	88174120622006	HARPREET KAUR		
25	88174120622007	JASPREET KAUR		
26	88174120622008	KIRAN KAUR		
27	88174120622009	KIRANJOT KAUR		
28	88174120622010	KOMALPREET KAUR		
29	88174120622011	LOVEPREET KAUR		
30	88174120622012	NGEETA RANI		
31	88174120622013	PARMINDER KAUR		
32	88174120622014	RAJO KAUR		
33	88174120622015	RAMANDEEP KAUR		
34	88174120622016	RAMNEET KAUR		
35	88174120622017	SHABNAMPREET KAUR		
36	88174120622018	SIMRANJEET KAUR		
37	88174120622019	SUKHWINDER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1111 / INDUSTRIAL TRAINING INSTITUTE, BASSI PATHANA

Course : 664 / PUNJABI STENOGRAPHY Class: First

Subject : 17416 / COGNATE

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1212 / INDUSTRIAL TRAINING INSTITUTE, LALRU

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: First

Subject : 44411 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88242121420014	PINKI		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1212 / INDUSTRIAL TRAINING INSTITUTE, LALRU

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88242121422001	AMANDEEP KAUR		
2	88242121422002	ANU		
3	88242121422003	BHAVIKA MALHOTRA		
4	88242121422004	GURPREET KAUR		
5	88242121422005	HARSHIKA CHUGH		
6	88242121422006	HARVINDER KAUR		
7	88242121422007	JASMEET KAUR		
8	88242121422008	KIRANDEEP KAUR		
9	88242121422009	KIRAT KAUR		
10	88242121422010	KM KALVINDAR KAUR		
11	88242121422011	KULJEET KAUR		
12	88242121422012	LAKSHMI DEVI		
13	88242121422013	MAMTA		
14	88242121422014	MANISHA		
15	88242121422015	MEENU RANI		
16	88242121422016	MEHAKPREET KAUR		
17	88242121422017	NAVJOT KAUR		
18	88242121422019	REEMA RANI		
19	88242121422020	RITIKA		
20	88242121422021	RITU BALA		
21	88242121422022	SATVINDER KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1212 / INDUSTRIAL TRAINING INSTITUTE, LALRU

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88242121422024	SUSHMA		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1212 / INDUSTRIAL TRAINING INSTITUTE, LALRU

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88242121422001	AMANDEEP KAUR		
2	88242121422002	ANU		
3	88242121422003	BHAVIKA MALHOTRA		
4	88242121422004	GURPREET KAUR		
5	88242121422005	HARSHIKA CHUGH		
6	88242121422006	HARVINDER KAUR		
7	88242121422007	JASMEET KAUR		
8	88242121422008	KIRANDEEP KAUR		
9	88242121422009	KIRAT KAUR		
10	88242121422010	KM KALVINDAR KAUR		
11	88242121422011	KULJEET KAUR		
12	88242121422012	LAKSHMI DEVI		
13	88242121422013	MAMTA		
14	88242121422014	MANISHA		
15	88242121422015	MEENU RANI		
16	88242121422016	MEHAKPREET KAUR		
17	88242121422017	NAVJOT KAUR		
18	88242121422019	REEMA RANI		
19	88242121422020	RITIKA		
20	88242121422021	RITU BALA		
21	88242121422022	SATVINDER KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1212 / INDUSTRIAL TRAINING INSTITUTE, LALRU

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88242121422024	SUSHMA		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1212 / INDUSTRIAL TRAINING INSTITUTE, LALRU

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88242121422001	AMANDEEP KAUR		
2	88242121422002	ANU		
3	88242121422003	BHAVIKA MALHOTRA		
4	88242121422004	GURPREET KAUR		
5	88242121422005	HARSHIKA CHUGH		
6	88242121422006	HARVINDER KAUR		
7	88242121422007	JASMEET KAUR		
8	88242121422008	KIRANDEEP KAUR		
9	88242121422009	KIRAT KAUR		
10	88242121422010	KM KALVINDAR KAUR		
11	88242121422011	KULJEET KAUR		
12	88242121422012	LAKSHMI DEVI		
13	88242121422013	MAMTA		
14	88242121422014	MANISHA		
15	88242121422015	MEENU RANI		
16	88242121422016	MEHAKPREET KAUR		
17	88242121422017	NAVJOT KAUR		
18	88242121422019	REEMA RANI		
19	88242121422020	RITIKA		
20	88242121422021	RITU BALA		
21	88242121422022	SATVINDER KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1212 / INDUSTRIAL TRAINING INSTITUTE, LALRU

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88242121422024	SUSHMA		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 126 / MECHANIC (MOTOR VEHICLE) Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88215211521011	HARWINDER SINGH		
2	88215211521014	KARAN SINGH		
3	88215211521021	PRATHAM SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 126 / MECHANIC (MOTOR VEHICLE) Class: Second

Subject : 44441 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88215211521001	AMANDEEP SINGH		
2	88215211521004	BARINDER SINGH		
3	88215211521005	DAWINDER SINGH		
4	88215211521006	GURLAL SINGH		
5	88215211521007	GURNEET SINGH		
6	88215211521011	HARWINDER SINGH		
7	88215211521014	KARAN SINGH		
8	88215211521015	KARMPAL SINGH		
9	88215211521017	MANJEET SINGH		
10	88215211521019	MANPREET SINGH		
11	88215211521020	MANPREET SINGH		
12	88215211521021	PRATHAM SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 126 / MECHANIC (MOTOR VEHICLE) Class: Second

Subject : 44441 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 126 / MECHANIC (MOTOR VEHICLE) Class: Second

Subject : 44444 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88215211521001	AMANDEEP SINGH		
2	88215211521004	BARINDER SINGH		
3	88215211521005	DAWINDER SINGH		
4	88215211521006	GURLAL SINGH		
5	88215211521007	GURNEET SINGH		
6	88215211521011	HARWINDER SINGH		
7	88215211521014	KARAN SINGH		
8	88215211521015	KARMPAL SINGH		
9	88215211521017	MANJEET SINGH		
10	88215211521019	MANPREET SINGH		
11	88215211521020	MANPREET SINGH		
12	88215211521021	PRATHAM SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 126 / MECHANIC (MOTOR VEHICLE) Class: Second

Subject : 44444 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 126 / MECHANIC (MOTOR VEHICLE) Class: Second

Subject : 44445 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88215211521001	AMANDEEP SINGH		
2	88215211521004	BARINDER SINGH		
3	88215211521005	DAWINDER SINGH		
4	88215211521006	GURLAL SINGH		
5	88215211521007	GURNEET SINGH		
6	88215211521011	HARWINDER SINGH		
7	88215211521014	KARAN SINGH		
8	88215211521015	KARMPAL SINGH		
9	88215211521017	MANJEET SINGH		
10	88215211521019	MANPREET SINGH		
11	88215211521020	MANPREET SINGH		
12	88215211521021	PRATHAM SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 126 / MECHANIC (MOTOR VEHICLE) Class: Second

Subject : 44445 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 132 / ELECTRICIAN

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231211521028	GAGANDEEP SINGH		
2	88231211521032	JASWINDER SINGH		
3	88231211521034	KARANVEER SINGH		
4	88231211521038	MANDEEP SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 132 / ELECTRICIAN

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231211521032	JASWINDER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 132 / ELECTRICIAN

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231211521032	JASWINDER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44421 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231211519079	Barinder Singh		
2	88231211519080	Dawinder Singh		
3	88231211519081	Gurpreet Singh		
4	88231211519082	Jagdeep Singh		
5	88231211519084	Karanveer Singh		
6	88231211519085	Kulwant Singh		
7	88231211519087	Pardeep Singh		
8	88231211519088	Piratpal Singh		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44441 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231211521025	ARMAN SINGH		
2	88231211521026	ARSHPREET SINGH		
3	88231211521027	CHANDPREET SINGH		
4	88231211521028	GAGANDEEP SINGH		
5	88231211521029	GURDHIAN SINGH		
6	88231211521030	HARPINDER SINGH		
7	88231211521031	JASHAN SINGH		
8	88231211521033	JYOTI RANI		
9	88231211521034	KARANVEER SINGH		
10	88231211521035	KIRAN SIDHU		
11	88231211521036	KULDEEP SINGH		
12	88231211521037	MANDEEP KAUR		
13	88231211521038	MANDEEP SINGH		
14	88231211521039	MANDEEP SINGH		
15	88231211521040	MANPREET SINGH		
16	88231211521041	MANPREET SINGH		
17	88231211521043	RAJNI DEVI		
18	88231211521044	SUKHCHAIN SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44441 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44444 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231211521025	ARMAN SINGH		
2	88231211521026	ARSHPREET SINGH		
3	88231211521027	CHANDPREET SINGH		
4	88231211521028	GAGANDEEP SINGH		
5	88231211521029	GURDHIAN SINGH		
6	88231211521030	HARPINDER SINGH		
7	88231211521031	JASHAN SINGH		
8	88231211521033	JYOTI RANI		
9	88231211521034	KARANVEER SINGH		
10	88231211521035	KIRAN SIDHU		
11	88231211521036	KULDEEP SINGH		
12	88231211521037	MANDEEP KAUR		
13	88231211521038	MANDEEP SINGH		
14	88231211521039	MANDEEP SINGH		
15	88231211521040	MANPREET SINGH		
16	88231211521041	MANPREET SINGH		
17	88231211521043	RAJNI DEVI		
18	88231211521044	SUKHCHAIN SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44444 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44445 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231211521025	ARMAN SINGH		
2	88231211521026	ARSHPREET SINGH		
3	88231211521027	CHANDPREET SINGH		
4	88231211521028	GAGANDEEP SINGH		
5	88231211521029	GURDHIAN SINGH		
6	88231211521030	HARPINDER SINGH		
7	88231211521031	JASHAN SINGH		
8	88231211521033	JYOTI RANI		
9	88231211521034	KARANVEER SINGH		
10	88231211521035	KIRAN SIDHU		
11	88231211521036	KULDEEP SINGH		
12	88231211521037	MANDEEP KAUR		
13	88231211521038	MANDEEP SINGH		
14	88231211521039	MANDEEP SINGH		
15	88231211521040	MANPREET SINGH		
16	88231211521041	MANPREET SINGH		
17	88231211521043	RAJNI DEVI		
18	88231211521044	SUKHCHAIN SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44445 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88242111721004	BHUPINDER SINGH		
2	88242111722005	DILBAGH SINGH		
3	88242111722006	GOURAV SHARMA		
4	88242111722008	HARMAN SINGH		
5	88242111722010	HARMANPREET SINGH		
6	88242111722011	HEENA		
7	88242111722012	JASKARAN SINGH		
8	88242111722013	JASPREET KAUR		
9	88242111722014	JASPREET KAUR		
10	88242111722015	JASPREET KAUR		
11	88242111722017	JASPREET SINGH		
12	88242111722018	JASPREET SINGH		
13	88242111722021	JYOTI KAUR		
14	88242111722022	KAJAL RANI		
15	88242111722023	KAMALJEET KAUR		
16	88242111722024	KAMALJEET SIDHU		
17	88242111722025	KIRAN		
18	88242111722026	LOVEPREET KAUR		
19	88242111722027	LOVEPREET SINGH		
20	88242111722028	MAMTA		
21	88242111722030	MANPREET KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88242111722031	MANVEER SINGH		
23	88242111722032	MEHAKDEEP SINGH		
24	88242111722033	NARINDER SINGH		
25	88242111722035	PARDEEP SINGH		
26	88242111722037	PERMINDER SINGH		
27	88242111722039	POOJA RANI		
28	88242111722040	RAMANDEEP KAUR		
29	88242111722042	SANDEEP SINGH SAHOTA		
30	88242111722043	SANGEETA DEVI		
31	88242111722045	SIMRANJEET KAUR		
32	88242111722046	SIMRANJOT KAUR		
33	88242111722047	SONI		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: First

Subject : 44431 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88242111722005	DILBAGH SINGH		
2	88242111722006	GOURAV SHARMA		
3	88242111722008	HARMAN SINGH		
4	88242111722010	HARMANPREET SINGH		
5	88242111722011	HEENA		
6	88242111722012	JASKARAN SINGH		
7	88242111722013	JASPREET KAUR		
8	88242111722014	JASPREET KAUR		
9	88242111722015	JASPREET KAUR		
10	88242111722017	JASPREET SINGH		
11	88242111722018	JASPREET SINGH		
12	88242111722021	JYOTI KAUR		
13	88242111722022	KAJAL RANI		
14	88242111722023	KAMALJEET KAUR		
15	88242111722024	KAMALJEET SIDHU		
16	88242111722025	KIRAN		
17	88242111722026	LOVEPREET KAUR		
18	88242111722027	LOVEPREET SINGH		
19	88242111722028	MAMTA		
20	88242111722030	MANPREET KAUR		
21	88242111722031	MANVEER SINGH		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88242111722032	MEHAKDEEP SINGH		
23	88242111722033	NARINDER SINGH		
24	88242111722035	PARDEEP SINGH		
25	88242111722037	PERMINDER SINGH		
26	88242111722039	POOJA RANI		
27	88242111722040	RAMANDEEP KAUR		
28	88242111722042	SANDEEP SINGH SAHOTA		
29	88242111722043	SANGEETA DEVI		
30	88242111722045	SIMRANJEET KAUR		
31	88242111722046	SIMRANJOT KAUR		
32	88242111722047	SONI		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88242111722005	DILBAGH SINGH		
2	88242111722006	GOURAV SHARMA		
3	88242111722008	HARMAN SINGH		
4	88242111722010	HARMANPREET SINGH		
5	88242111722011	HEENA		
6	88242111722012	JASKARAN SINGH		
7	88242111722013	JASPREET KAUR		
8	88242111722014	JASPREET KAUR		
9	88242111722015	JASPREET KAUR		
10	88242111722017	JASPREET SINGH		
11	88242111722018	JASPREET SINGH		
12	88242111722021	JYOTI KAUR		
13	88242111722022	KAJAL RANI		
14	88242111722023	KAMALJEET KAUR		
15	88242111722024	KAMALJEET SIDHU		
16	88242111722025	KIRAN		
17	88242111722026	LOVEPREET KAUR		
18	88242111722027	LOVEPREET SINGH		
19	88242111722028	MAMTA		
20	88242111722030	MANPREET KAUR		
21	88242111722031	MANVEER SINGH		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88242111722032	MEHAKDEEP SINGH		
23	88242111722033	NARINDER SINGH		
24	88242111722035	PARDEEP SINGH		
25	88242111722037	PERMINDER SINGH		
26	88242111722039	POOJA RANI		
27	88242111722040	RAMANDEEP KAUR		
28	88242111722042	SANDEEP SINGH SAHOTA		
29	88242111722043	SANGEETA DEVI		
30	88242111722045	SIMRANJEET KAUR		
31	88242111722046	SIMRANJOT KAUR		
32	88242111722047	SONI		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: First

Subject : 44435 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 370 / ART & CRAFTS

Class: First

Subject : 17055 / CRAFT (T)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370111719072	KUMARI SUSHMA		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 370 / ART & CRAFTS

Class: First

Subject : 17070 / PRINCIPLES OF EDUCATION

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370111719074	LOVEPREET SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 370 / ART & CRAFTS

Class: Second

Subject : 70071 / HISTORY & APPRECIATION OF ART

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370111719072	KUMARI SUSHMA		
2	88370111719074	LOVEPREET SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 651 / COSMETOLOGY

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88239111722049	AKASHDEEP		
2	88239111722050	AMANDEEP KAUR		
3	88239111722051	ANCHAL RANI		
4	88239111722052	BOBBY		
5	88239111722053	DIPANPREET KAUR		
6	88239111722055	GAGANDEEP KAUR		
7	88239111722056	GITAKSH		
8	88239111722057	GURBAAJ SINGH		
9	88239111722058	GURDEEP KAUR		
10	88239111722061	HARPREET KAUR		
11	88239111722062	HARPREET KAUR		
12	88239111722063	HARSHI		
13	88239111722064	JAGJOT SHARMA JYOTI		
14	88239111722065	JASPREET JOSHI		
15	88239111722069	MAMTA RANI		
16	88239111722070	MANJEET KAUR		
17	88239111722071	MANPREET KAUR		
18	88239111722072	MEENAKSHI		
19	88239111722073	NAGMA		
20	88239111722074	NAJIA RANI		
21	88239111722076	NISHU SHARMA		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 651 / COSMETOLOGY

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88239111722077	PINKY		
23	88239111722079	PREET		
24	88239111722080	PRIYA		
25	88239111722081	PRIYA RANI		
26	88239111722082	RAJANDEEP KAUR		
27	88239111722084	RAJINDER SINGH		
28	88239111722087	RUKSHANA		
29	88239111722088	SANDEEP KAUR		
30	88239111722089	SHEHNAZ		
31	88239111722090	SHIVANI LAMBA		
32	88239111722092	SUHANI		
33	88239111722093	SUKHDEEP KAUR		
34	88239111722094	SUKHPAL SINGH		
35	88239111722095	SUMANDEEP KAUR		
36	88239111722096	VIKASDEEP SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 651 / COSMETOLOGY

Class: First

Subject : 44431 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 651 / COSMETOLOGY

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88239111721064	JOTPREET KAUR		
2	88239111722049	AKASHDEEP		
3	88239111722050	AMANDEEP KAUR		
4	88239111722051	ANCHAL RANI		
5	88239111722052	BOBBY		
6	88239111722053	DIPANPREET KAUR		
7	88239111722055	GAGANDEEP KAUR		
8	88239111722056	GITAKSH		
9	88239111722057	GURBAAJ SINGH		
10	88239111722058	GURDEEP KAUR		
11	88239111722061	HARPREET KAUR		
12	88239111722062	HARPREET KAUR		
13	88239111722063	HARSHI		
14	88239111722064	JAGJOT SHARMA JYOTI		
15	88239111722065	JASPREET JOSHI		
16	88239111722069	MAMTA RANI		
17	88239111722070	MANJEET KAUR		
18	88239111722071	MANPREET KAUR		
19	88239111722072	MEENAKSHI		
20	88239111722073	NAGMA		
21	88239111722074	NAJIA RANI		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 651 / COSMETOLOGY

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88239111722076	NISHU SHARMA		
23	88239111722077	PINKY		
24	88239111722079	PREET		
25	88239111722080	PRIYA		
26	88239111722081	PRIYA RANI		
27	88239111722082	RAJANDEEP KAUR		
28	88239111722084	RAJINDER SINGH		
29	88239111722087	RUKSHANA		
30	88239111722088	SANDEEP KAUR		
31	88239111722089	SHEHNAZ		
32	88239111722090	SHIVANI LAMBA		
33	88239111722092	SUHANI		
34	88239111722093	SUKHDEEP KAUR		
35	88239111722094	SUKHPAL SINGH		
36	88239111722095	SUMANDEEP KAUR		
37	88239111722096	VIKASDEEP SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 651 / COSMETOLOGY

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 651 / COSMETOLOGY

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88239111722049	AKASHDEEP		
2	88239111722050	AMANDEEP KAUR		
3	88239111722051	ANCHAL RANI		
4	88239111722052	BOBBY		
5	88239111722053	DIPANPREET KAUR		
6	88239111722055	GAGANDEEP KAUR		
7	88239111722056	GITAKSH		
8	88239111722057	GURBAAJ SINGH		
9	88239111722058	GURDEEP KAUR		
10	88239111722061	HARPREET KAUR		
11	88239111722062	HARPREET KAUR		
12	88239111722063	HARSHI		
13	88239111722064	JAGJOT SHARMA JYOTI		
14	88239111722065	JASPREET JOSHI		
15	88239111722069	MAMTA RANI		
16	88239111722070	MANJEET KAUR		
17	88239111722071	MANPREET KAUR		
18	88239111722072	MEENAKSHI		
19	88239111722073	NAGMA		
20	88239111722074	NAJIA RANI		
21	88239111722076	NISHU SHARMA		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 651 / COSMETOLOGY

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88239111722077	PINKY		
23	88239111722079	PREET		
24	88239111722080	PRIYA		
25	88239111722081	PRIYA RANI		
26	88239111722082	RAJANDEEP KAUR		
27	88239111722084	RAJINDER SINGH		
28	88239111722087	RUKSHANA		
29	88239111722088	SANDEEP KAUR		
30	88239111722089	SHEHNAZ		
31	88239111722090	SHIVANI LAMBA		
32	88239111722092	SUHANI		
33	88239111722093	SUKHDEEP KAUR		
34	88239111722094	SUKHPAL SINGH		
35	88239111722095	SUMANDEEP KAUR		
36	88239111722096	VIKASDEEP SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 651 / COSMETOLOGY

Class: First

Subject : 44435 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 660 / WELDER

Class: First

Subject : 44412 / WORKSHOP CALCULATIONS AND SCIENCE

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88212111519046	AMBERATPAL SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 660 / WELDER

Class: First

Subject : 44413 / ENGINEERING DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88212111519048	GAGANDEEP SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 660 / WELDER

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88212111521047	AVTAR SINGH		
2	88212111521052	GURPREET SINGH		
3	88212111521053	GURPREET SINGH		
4	88212111521054	GURSEWAK SINGH		
5	88212111521058	KASHMIR SINGH		
6	88212111521059	MANDEEP SINGH		
7	88212111521064	RUPINDER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 660 / WELDER

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88212111521054	GURSEWAK SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 660 / WELDER

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88212111521054	GURSEWAK SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17051 / PAINTING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370211721136	VAIBHAV DHALTA		
2	88370211722097	AKASHDEEP SINGH		
3	88370211722101	ANIL KUMAR		
4	88370211722104	BALRAM SINGH		
5	88370211722105	DIVANSHU		
6	88370211722106	GAGAN CHOPRA		
7	88370211722107	GAGANDEEP KAUR		
8	88370211722108	GOURAV KUMAR		
9	88370211722110	HARPREET KAUR		
10	88370211722111	JAGVIR SINGH		
11	88370211722112	JASKARAN SINGH		
12	88370211722115	KAJAL		
13	88370211722116	KIRANJOT KAUR		
14	88370211722117	KULDEEP KAUR		
15	88370211722118	LACHHMI DEVI		
16	88370211722121	LOVEPREET SINGH		
17	88370211722122	MANMINDER KAUR		
18	88370211722124	MAYA DEVI		
19	88370211722126	NAVJOT SINGH		
20	88370211722127	RAHUL SINGH		
21	88370211722128	RAJNI KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17051 / PAINTING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88370211722129	RAMANDEEP KAUR		
23	88370211722131	RAZIA		
24	88370211722132	SANDEEP SINGH		
25	88370211722133	SARBJEET KAUR		
26	88370211722135	SUNIDHI		
27	88370211722136	TARANPREET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17055 / CRAFT (T)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370211720133	SUKHDEEP SINGH		
2	88370211722097	AKASHDEEP SINGH		
3	88370211722101	ANIL KUMAR		
4	88370211722104	BALRAM SINGH		
5	88370211722105	DIVANSHU		
6	88370211722106	GAGAN CHOPRA		
7	88370211722107	GAGANDEEP KAUR		
8	88370211722108	GOURAV KUMAR		
9	88370211722110	HARPREET KAUR		
10	88370211722111	JAGVIR SINGH		
11	88370211722112	JASKARAN SINGH		
12	88370211722115	KAJAL		
13	88370211722116	KIRANJOT KAUR		
14	88370211722117	KULDEEP KAUR		
15	88370211722118	LACHHMI DEVI		
16	88370211722121	LOVEPREET SINGH		
17	88370211722122	MANMINDER KAUR		
18	88370211722124	MAYA DEVI		
19	88370211722126	NAVJOT SINGH		
20	88370211722127	RAHUL SINGH		
21	88370211722128	RAJNI KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17055 / CRAFT (T)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88370211722129	RAMANDEEP KAUR		
23	88370211722131	RAZIA		
24	88370211722132	SANDEEP SINGH		
25	88370211722133	SARBJEET KAUR		
26	88370211722135	SUNIDHI		
27	88370211722136	TARANPREET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17059 / DESIGN

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370211722097	AKASHDEEP SINGH		
2	88370211722101	ANIL KUMAR		
3	88370211722104	BALRAM SINGH		
4	88370211722105	DIVANSHU		
5	88370211722106	GAGAN CHOPRA		
6	88370211722107	GAGANDEEP KAUR		
7	88370211722108	GOURAV KUMAR		
8	88370211722110	HARPREET KAUR		
9	88370211722111	JAGVIR SINGH		
10	88370211722112	JASKARAN SINGH		
11	88370211722115	KAJAL		
12	88370211722116	KIRANJOT KAUR		
13	88370211722117	KULDEEP KAUR		
14	88370211722118	LACHHMI DEVI		
15	88370211722121	LOVEPREET SINGH		
16	88370211722122	MANMINDER KAUR		
17	88370211722124	MAYA DEVI		
18	88370211722126	NAVJOT SINGH		
19	88370211722127	RAHUL SINGH		
20	88370211722128	RAJNI KAUR		
21	88370211722129	RAMANDEEP KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17059 / DESIGN

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88370211722131	RAZIA		
23	88370211722132	SANDEEP SINGH		
24	88370211722133	SARBJEET KAUR		
25	88370211722135	SUNIDHI		
26	88370211722136	TARANPREET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17060 / STILL LIFE

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370211722097	AKASHDEEP SINGH		
2	88370211722101	ANIL KUMAR		
3	88370211722104	BALRAM SINGH		
4	88370211722105	DIVANSHU		
5	88370211722106	GAGAN CHOPRA		
6	88370211722107	GAGANDEEP KAUR		
7	88370211722108	GOURAV KUMAR		
8	88370211722110	HARPREET KAUR		
9	88370211722111	JAGVIR SINGH		
10	88370211722112	JASKARAN SINGH		
11	88370211722115	KAJAL		
12	88370211722116	KIRANJOT KAUR		
13	88370211722117	KULDEEP KAUR		
14	88370211722118	LACHHMI DEVI		
15	88370211722121	LOVEPREET SINGH		
16	88370211722122	MANMINDER KAUR		
17	88370211722124	MAYA DEVI		
18	88370211722126	NAVJOT SINGH		
19	88370211722127	RAHUL SINGH		
20	88370211722128	RAJNI KAUR		
21	88370211722129	RAMANDEEP KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17060 / STILL LIFE

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88370211722131	RAZIA		
23	88370211722132	SANDEEP SINGH		
24	88370211722133	SARBJEET KAUR		
25	88370211722135	SUNIDHI		
26	88370211722136	TARANPREET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17065 / CRAFT (P)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370211722097	AKASHDEEP SINGH		
2	88370211722101	ANIL KUMAR		
3	88370211722104	BALRAM SINGH		
4	88370211722105	DIVANSHU		
5	88370211722106	GAGAN CHOPRA		
6	88370211722107	GAGANDEEP KAUR		
7	88370211722108	GOURAV KUMAR		
8	88370211722110	HARPREET KAUR		
9	88370211722111	JAGVIR SINGH		
10	88370211722112	JASKARAN SINGH		
11	88370211722115	KAJAL		
12	88370211722116	KIRANJOT KAUR		
13	88370211722117	KULDEEP KAUR		
14	88370211722118	LACHHMI DEVI		
15	88370211722121	LOVEPREET SINGH		
16	88370211722122	MANMINDER KAUR		
17	88370211722124	MAYA DEVI		
18	88370211722126	NAVJOT SINGH		
19	88370211722127	RAHUL SINGH		
20	88370211722128	RAJNI KAUR		
21	88370211722129	RAMANDEEP KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17065 / CRAFT (P)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88370211722131	RAZIA		
23	88370211722132	SANDEEP SINGH		
24	88370211722133	SARBJEET KAUR		
25	88370211722135	SUNIDHI		
26	88370211722136	TARANPREET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17070 / PRINCIPLES OF EDUCATION

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370211720133	SUKHDEEP SINGH		
2	88370211722097	AKASHDEEP SINGH		
3	88370211722101	ANIL KUMAR		
4	88370211722104	BALRAM SINGH		
5	88370211722105	DIVANSHU		
6	88370211722106	GAGAN CHOPRA		
7	88370211722107	GAGANDEEP KAUR		
8	88370211722108	GOURAV KUMAR		
9	88370211722110	HARPREET KAUR		
10	88370211722111	JAGVIR SINGH		
11	88370211722112	JASKARAN SINGH		
12	88370211722115	KAJAL		
13	88370211722116	KIRANJOT KAUR		
14	88370211722117	KULDEEP KAUR		
15	88370211722118	LACHHMI DEVI		
16	88370211722121	LOVEPREET SINGH		
17	88370211722122	MANMINDER KAUR		
18	88370211722124	MAYA DEVI		
19	88370211722126	NAVJOT SINGH		
20	88370211722127	RAHUL SINGH		
21	88370211722128	RAJNI KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17070 / PRINCIPLES OF EDUCATION

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88370211722129	RAMANDEEP KAUR		
23	88370211722131	RAZIA		
24	88370211722132	SANDEEP SINGH		
25	88370211722133	SARBJEET KAUR		
26	88370211722135	SUNIDHI		
27	88370211722136	TARANPREET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17071 / HISTORY & APPRECIATION OF ART

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370211722097	AKASHDEEP SINGH		
2	88370211722101	ANIL KUMAR		
3	88370211722104	BALRAM SINGH		
4	88370211722105	DIVANSHU		
5	88370211722106	GAGAN CHOPRA		
6	88370211722107	GAGANDEEP KAUR		
7	88370211722108	GOURAV KUMAR		
8	88370211722110	HARPREET KAUR		
9	88370211722111	JAGVIR SINGH		
10	88370211722112	JASKARAN SINGH		
11	88370211722115	KAJAL		
12	88370211722116	KIRANJOT KAUR		
13	88370211722117	KULDEEP KAUR		
14	88370211722118	LACHHMI DEVI		
15	88370211722121	LOVEPREET SINGH		
16	88370211722122	MANMINDER KAUR		
17	88370211722124	MAYA DEVI		
18	88370211722126	NAVJOT SINGH		
19	88370211722127	RAHUL SINGH		
20	88370211722128	RAJNI KAUR		
21	88370211722129	RAMANDEEP KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17071 / HISTORY & APPRECIATION OF ART

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88370211722131	RAZIA		
23	88370211722132	SANDEEP SINGH		
24	88370211722133	SARBJEET KAUR		
25	88370211722135	SUNIDHI		
26	88370211722136	TARANPREET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17072 / COMP. AWARENESS & GRAPHICS (T)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370211722097	AKASHDEEP SINGH		
2	88370211722101	ANIL KUMAR		
3	88370211722104	BALRAM SINGH		
4	88370211722105	DIVANSHU		
5	88370211722106	GAGAN CHOPRA		
6	88370211722107	GAGANDEEP KAUR		
7	88370211722108	GOURAV KUMAR		
8	88370211722110	HARPREET KAUR		
9	88370211722111	JAGVIR SINGH		
10	88370211722112	JASKARAN SINGH		
11	88370211722115	KAJAL		
12	88370211722116	KIRANJOT KAUR		
13	88370211722117	KULDEEP KAUR		
14	88370211722118	LACHHMI DEVI		
15	88370211722121	LOVEPREET SINGH		
16	88370211722122	MANMINDER KAUR		
17	88370211722124	MAYA DEVI		
18	88370211722126	NAVJOT SINGH		
19	88370211722127	RAHUL SINGH		
20	88370211722128	RAJNI KAUR		
21	88370211722129	RAMANDEEP KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17072 / COMP. AWARENESS & GRAPHICS (T)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88370211722131	RAZIA		
23	88370211722132	SANDEEP SINGH		
24	88370211722133	SARBJEET KAUR		
25	88370211722135	SUNIDHI		
26	88370211722136	TARANPREET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17073 / GEOMETRICAL DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370211722097	AKASHDEEP SINGH		
2	88370211722101	ANIL KUMAR		
3	88370211722104	BALRAM SINGH		
4	88370211722105	DIVANSHU		
5	88370211722106	GAGAN CHOPRA		
6	88370211722107	GAGANDEEP KAUR		
7	88370211722108	GOURAV KUMAR		
8	88370211722110	HARPREET KAUR		
9	88370211722111	JAGVIR SINGH		
10	88370211722112	JASKARAN SINGH		
11	88370211722115	KAJAL		
12	88370211722116	KIRANJOT KAUR		
13	88370211722117	KULDEEP KAUR		
14	88370211722118	LACHHMI DEVI		
15	88370211722121	LOVEPREET SINGH		
16	88370211722122	MANMINDER KAUR		
17	88370211722124	MAYA DEVI		
18	88370211722126	NAVJOT SINGH		
19	88370211722127	RAHUL SINGH		
20	88370211722128	RAJNI KAUR		
21	88370211722129	RAMANDEEP KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17073 / GEOMETRICAL DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88370211722131	RAZIA		
23	88370211722132	SANDEEP SINGH		
24	88370211722133	SARBJEET KAUR		
25	88370211722135	SUNIDHI		
26	88370211722136	TARANPREET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17082 / COMP. AWARENESS & GRAPHICS (P)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370211722097	AKASHDEEP SINGH		
2	88370211722101	ANIL KUMAR		
3	88370211722104	BALRAM SINGH		
4	88370211722105	DIVANSHU		
5	88370211722106	GAGAN CHOPRA		
6	88370211722107	GAGANDEEP KAUR		
7	88370211722108	GOURAV KUMAR		
8	88370211722110	HARPREET KAUR		
9	88370211722111	JAGVIR SINGH		
10	88370211722112	JASKARAN SINGH		
11	88370211722115	KAJAL		
12	88370211722116	KIRANJOT KAUR		
13	88370211722117	KULDEEP KAUR		
14	88370211722118	LACHHMI DEVI		
15	88370211722121	LOVEPREET SINGH		
16	88370211722122	MANMINDER KAUR		
17	88370211722124	MAYA DEVI		
18	88370211722126	NAVJOT SINGH		
19	88370211722127	RAHUL SINGH		
20	88370211722128	RAJNI KAUR		
21	88370211722129	RAMANDEEP KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17082 / COMP. AWARENESS & GRAPHICS (P)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88370211722131	RAZIA		
23	88370211722132	SANDEEP SINGH		
24	88370211722133	SARBJEET KAUR		
25	88370211722135	SUNIDHI		
26	88370211722136	TARANPREET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70051 / PAINTING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370211721098	AMANDEEP KAUR		
2	88370211721101	BABITA RANI		
3	88370211721102	BABLU		
4	88370211721103	GURKAMAL SINGH		
5	88370211721105	HARPREET KAUR		
6	88370211721106	HEENA BATTA		
7	88370211721107	HUSHANDEEP KAUR		
8	88370211721108	JASPREET KAUR		
9	88370211721110	JASPREET KAUR		
10	88370211721112	MAMTA RANI		
11	88370211721114	MANNWINDER SINGH		
12	88370211721115	MANPREET KAUR		
13	88370211721116	MANPREET KAUR		
14	88370211721117	MANPREET KAUR		
15	88370211721118	MANPREET SINGH		
16	88370211721119	MUSKAN		
17	88370211721120	NAVNEET KAUR		
18	88370211721121	NEELAM JASSAL		
19	88370211721122	POONAM VERMA		
20	88370211721124	RAKHA RANI		
21	88370211721126	RAMANDEEP SINGH		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70051 / PAINTING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88370211721128	REENU		
23	88370211721129	SANDEEP KAUR		
24	88370211721131	SATWINDER KAUR		
25	88370211721132	SAZIA PARVEEN		
26	88370211721133	SUKHWINDER SINGH		
27	88370211721136	VAIBHAV DHALTA		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70055 / CRAFT (T)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370211720133	SUKHDEEP SINGH		
2	88370211721098	AMANDEEP KAUR		
3	88370211721101	BABITA RANI		
4	88370211721102	BABLU		
5	88370211721103	GURKAMAL SINGH		
6	88370211721105	HARPREET KAUR		
7	88370211721106	HEENA BATTA		
8	88370211721107	HUSHANDEEP KAUR		
9	88370211721108	JASPREET KAUR		
10	88370211721110	JASPREET KAUR		
11	88370211721112	MAMTA RANI		
12	88370211721114	MANNWINDER SINGH		
13	88370211721115	MANPREET KAUR		
14	88370211721116	MANPREET KAUR		
15	88370211721117	MANPREET KAUR		
16	88370211721118	MANPREET SINGH		
17	88370211721119	MUSKAN		
18	88370211721120	NAVNEET KAUR		
19	88370211721121	NEELAM JASSAL		
20	88370211721122	POONAM VERMA		
21	88370211721124	RAKHA RANI		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70055 / CRAFT (T)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88370211721126	RAMANDEEP SINGH		
23	88370211721128	REENU		
24	88370211721129	SANDEEP KAUR		
25	88370211721131	SATWINDER KAUR		
26	88370211721132	SAZIA PARVEEN		
27	88370211721133	SUKHWINDER SINGH		
28	88370211721136	VAIBHAV DHALTA		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70056 / CRAFT (P)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370211721098	AMANDEEP KAUR		
2	88370211721101	BABITA RANI		
3	88370211721102	BABLU		
4	88370211721103	GURKAMAL SINGH		
5	88370211721105	HARPREET KAUR		
6	88370211721106	HEENA BATTA		
7	88370211721107	HUSHANDEEP KAUR		
8	88370211721108	JASPREET KAUR		
9	88370211721110	JASPREET KAUR		
10	88370211721112	MAMTA RANI		
11	88370211721114	MANNWINDER SINGH		
12	88370211721115	MANPREET KAUR		
13	88370211721116	MANPREET KAUR		
14	88370211721117	MANPREET KAUR		
15	88370211721118	MANPREET SINGH		
16	88370211721119	MUSKAN		
17	88370211721120	NAVNEET KAUR		
18	88370211721121	NEELAM JASSAL		
19	88370211721122	POONAM VERMA		
20	88370211721124	RAKHA RANI		
21	88370211721126	RAMANDEEP SINGH		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70056 / CRAFT (P)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88370211721128	REENU		
23	88370211721129	SANDEEP KAUR		
24	88370211721131	SATWINDER KAUR		
25	88370211721132	SAZIA PARVEEN		
26	88370211721133	SUKHWINDER SINGH		
27	88370211721136	VAIBHAV DHALTA		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70070 / EDUCATIONAL PSYCHOLOGY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370211720114	KOMALPREET SINGH		
2	88370211720117	LOVEPREET SINGH		
3	88370211720133	SUKHDEEP SINGH		
4	88370211721098	AMANDEEP KAUR		
5	88370211721101	BABITA RANI		
6	88370211721102	BABLU		
7	88370211721103	GURKAMAL SINGH		
8	88370211721105	HARPREET KAUR		
9	88370211721106	HEENA BATTA		
10	88370211721107	HUSHANDEEP KAUR		
11	88370211721108	JASPREET KAUR		
12	88370211721110	JASPREET KAUR		
13	88370211721112	MAMTA RANI		
14	88370211721114	MANNWINDER SINGH		
15	88370211721115	MANPREET KAUR		
16	88370211721116	MANPREET KAUR		
17	88370211721117	MANPREET KAUR		
18	88370211721118	MANPREET SINGH		
19	88370211721119	MUSKAN		
20	88370211721120	NAVNEET KAUR		
21	88370211721121	NEELAM JASSAL		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70070 / EDUCATIONAL PSYCHOLOGY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88370211721122	POONAM VERMA		
23	88370211721124	RAKHA RANI		
24	88370211721126	RAMANDEEP SINGH		
25	88370211721128	REENU		
26	88370211721129	SANDEEP KAUR		
27	88370211721131	SATWINDER KAUR		
28	88370211721132	SAZIA PARVEEN		
29	88370211721133	SUKHWINDER SINGH		
30	88370211721136	VAIBHAV DHALTA		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70071 / HISTORY & APPRECIATION OF ART

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370211720099	BALKAR SINGH		
2	88370211720100	BHAGWANT SINGH		
3	88370211720105	GURJOT KAUR		
4	88370211720110	HITIKA SHARMA		
5	88370211720111	JASWINDER SINGH		
6	88370211720116	LAKHVEER SINGH		
7	88370211720117	LOVEPREET SINGH		
8	88370211720126	NISHA RANI		
9	88370211720133	SUKHDEEP SINGH		
10	88370211720134	SUKHRAJ SINGH		
11	88370211720135	TAMANA RANI		
12	88370211721098	AMANDEEP KAUR		
13	88370211721101	BABITA RANI		
14	88370211721102	BABLU		
15	88370211721103	GURKAMAL SINGH		
16	88370211721105	HARPREET KAUR		
17	88370211721106	HEENA BATTA		
18	88370211721107	HUSHANDEEP KAUR		
19	88370211721108	JASPREET KAUR		
20	88370211721110	JASPREET KAUR		
21	88370211721112	MAMTA RANI		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70071 / HISTORY & APPRECIATION OF ART

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88370211721114	MANNWINDER SINGH		
23	88370211721115	MANPREET KAUR		
24	88370211721116	MANPREET KAUR		
25	88370211721117	MANPREET KAUR		
26	88370211721118	MANPREET SINGH		
27	88370211721119	MUSKAN		
28	88370211721120	NAVNEET KAUR		
29	88370211721121	NEELAM JASSAL		
30	88370211721122	POONAM VERMA		
31	88370211721124	RAKHA RANI		
32	88370211721126	RAMANDEEP SINGH		
33	88370211721128	REENU		
34	88370211721129	SANDEEP KAUR		
35	88370211721131	SATWINDER KAUR		
36	88370211721132	SAZIA PARVEEN		
37	88370211721133	SUKHWINDER SINGH		
38	88370211721136	VAIBHAV DHALTA		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70071 / HISTORY & APPRECIATION OF ART

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70072 / COMMERCIAL ART

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370211721098	AMANDEEP KAUR		
2	88370211721101	BABITA RANI		
3	88370211721102	BABLU		
4	88370211721103	GURKAMAL SINGH		
5	88370211721105	HARPREET KAUR		
6	88370211721106	HEENA BATTA		
7	88370211721107	HUSHANDEEP KAUR		
8	88370211721108	JASPREET KAUR		
9	88370211721110	JASPREET KAUR		
10	88370211721112	MAMTA RANI		
11	88370211721114	MANNWINDER SINGH		
12	88370211721115	MANPREET KAUR		
13	88370211721116	MANPREET KAUR		
14	88370211721117	MANPREET KAUR		
15	88370211721118	MANPREET SINGH		
16	88370211721119	MUSKAN		
17	88370211721120	NAVNEET KAUR		
18	88370211721121	NEELAM JASSAL		
19	88370211721122	POONAM VERMA		
20	88370211721124	RAKHA RANI		
21	88370211721126	RAMANDEEP SINGH		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70072 / COMMERCIAL ART

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88370211721128	REENU		
23	88370211721129	SANDEEP KAUR		
24	88370211721131	SATWINDER KAUR		
25	88370211721132	SAZIA PARVEEN		
26	88370211721133	SUKHWINDER SINGH		
27	88370211721136	VAIBHAV DHALTA		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70073 / SCALE & PERSPECTIVE DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370211721098	AMANDEEP KAUR		
2	88370211721101	BABITA RANI		
3	88370211721102	BABLU		
4	88370211721103	GURKAMAL SINGH		
5	88370211721105	HARPREET KAUR		
6	88370211721106	HEENA BATTA		
7	88370211721107	HUSHANDEEP KAUR		
8	88370211721108	JASPREET KAUR		
9	88370211721110	JASPREET KAUR		
10	88370211721112	MAMTA RANI		
11	88370211721114	MANNWINDER SINGH		
12	88370211721115	MANPREET KAUR		
13	88370211721116	MANPREET KAUR		
14	88370211721117	MANPREET KAUR		
15	88370211721118	MANPREET SINGH		
16	88370211721119	MUSKAN		
17	88370211721120	NAVNEET KAUR		
18	88370211721121	NEELAM JASSAL		
19	88370211721122	POONAM VERMA		
20	88370211721124	RAKHA RANI		
21	88370211721126	RAMANDEEP SINGH		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70073 / SCALE & PERSPECTIVE DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88370211721128	REENU		
23	88370211721129	SANDEEP KAUR		
24	88370211721131	SATWINDER KAUR		
25	88370211721132	SAZIA PARVEEN		
26	88370211721133	SUKHWINDER SINGH		
27	88370211721136	VAIBHAV DHALTA		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70074 / TEACHING OF ART & CRAFT (P)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370211721098	AMANDEEP KAUR		
2	88370211721101	BABITA RANI		
3	88370211721102	BABLU		
4	88370211721103	GURKAMAL SINGH		
5	88370211721105	HARPREET KAUR		
6	88370211721106	HEENA BATTA		
7	88370211721107	HUSHANDEEP KAUR		
8	88370211721108	JASPREET KAUR		
9	88370211721110	JASPREET KAUR		
10	88370211721112	MAMTA RANI		
11	88370211721114	MANNWINDER SINGH		
12	88370211721115	MANPREET KAUR		
13	88370211721116	MANPREET KAUR		
14	88370211721117	MANPREET KAUR		
15	88370211721118	MANPREET SINGH		
16	88370211721119	MUSKAN		
17	88370211721120	NAVNEET KAUR		
18	88370211721121	NEELAM JASSAL		
19	88370211721122	POONAM VERMA		
20	88370211721124	RAKHA RANI		
21	88370211721126	RAMANDEEP SINGH		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70074 / TEACHING OF ART & CRAFT (P)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88370211721128	REENU		
23	88370211721129	SANDEEP KAUR		
24	88370211721131	SATWINDER KAUR		
25	88370211721132	SAZIA PARVEEN		
26	88370211721133	SUKHWINDER SINGH		
27	88370211721136	VAIBHAV DHALTA		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70075 / PROJECT

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370211721098	AMANDEEP KAUR		
2	88370211721101	BABITA RANI		
3	88370211721102	BABLU		
4	88370211721103	GURKAMAL SINGH		
5	88370211721105	HARPREET KAUR		
6	88370211721106	HEENA BATTA		
7	88370211721107	HUSHANDEEP KAUR		
8	88370211721108	JASPREET KAUR		
9	88370211721110	JASPREET KAUR		
10	88370211721112	MAMTA RANI		
11	88370211721114	MANNWINDER SINGH		
12	88370211721115	MANPREET KAUR		
13	88370211721116	MANPREET KAUR		
14	88370211721117	MANPREET KAUR		
15	88370211721118	MANPREET SINGH		
16	88370211721119	MUSKAN		
17	88370211721120	NAVNEET KAUR		
18	88370211721121	NEELAM JASSAL		
19	88370211721122	POONAM VERMA		
20	88370211721124	RAKHA RANI		
21	88370211721126	RAMANDEEP SINGH		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70075 / PROJECT

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88370211721128	REENU		
23	88370211721129	SANDEEP KAUR		
24	88370211721131	SATWINDER KAUR		
25	88370211721132	SAZIA PARVEEN		
26	88370211721133	SUKHWINDER SINGH		
27	88370211721136	VAIBHAV DHALTA		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70082 / COMPUTER AWARENESS & GRAPHICS (P)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370211721098	AMANDEEP KAUR		
2	88370211721101	BABITA RANI		
3	88370211721102	BABLU		
4	88370211721103	GURKAMAL SINGH		
5	88370211721105	HARPREET KAUR		
6	88370211721106	HEENA BATTA		
7	88370211721107	HUSHANDEEP KAUR		
8	88370211721108	JASPREET KAUR		
9	88370211721110	JASPREET KAUR		
10	88370211721112	MAMTA RANI		
11	88370211721114	MANNWINDER SINGH		
12	88370211721115	MANPREET KAUR		
13	88370211721116	MANPREET KAUR		
14	88370211721117	MANPREET KAUR		
15	88370211721118	MANPREET SINGH		
16	88370211721119	MUSKAN		
17	88370211721120	NAVNEET KAUR		
18	88370211721121	NEELAM JASSAL		
19	88370211721122	POONAM VERMA		
20	88370211721124	RAKHA RANI		
21	88370211721126	RAMANDEEP SINGH		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70082 / COMPUTER AWARENESS & GRAPHICS (P)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88370211721128	REENU		
23	88370211721129	SANDEEP KAUR		
24	88370211721131	SATWINDER KAUR		
25	88370211721132	SAZIA PARVEEN		
26	88370211721133	SUKHWINDER SINGH		
27	88370211721136	VAIBHAV DHALTA		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 128 / FITTER

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88227211121051	MALKEET SINGH		
2	88227211121054	PARMINDER SINGH		
3	88227211121059	TARSEM SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 128 / FITTER

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88227211121059	TARSEM SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 128 / FITTER

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88227211121045	GURPREET SINGH		
2	88227211121051	MALKEET SINGH		
3	88227211121059	TARSEM SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 128 / FITTER

Class: Second

Subject : 44441 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88227211121042	GAGANDEEP SINGH		
2	88227211121043	GAGANDEEP SINGH		
3	88227211121045	GURPREET SINGH		
4	88227211121046	GURPREET SINGH KALER		
5	88227211121047	HUSANDEEP SINGH		
6	88227211121048	JAGROOP SINGH		
7	88227211121049	JAGSEER SINGH		
8	88227211121050	MAKHAN SINGH		
9	88227211121051	MALKEET SINGH		
10	88227211121054	PARMINDER SINGH		
11	88227211121055	SAHIBJIT SINGH		
12	88227211121056	SUKHWANT SINGH		
13	88227211121057	SUMIT		
14	88227211121058	TARANVEER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 128 / FITTER

Class: Second

Subject : 44441 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 128 / FITTER

Class: Second

Subject : 44444 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88227211121042	GAGANDEEP SINGH		
2	88227211121043	GAGANDEEP SINGH		
3	88227211121045	GURPREET SINGH		
4	88227211121046	GURPREET SINGH KALER		
5	88227211121047	HUSANDEEP SINGH		
6	88227211121048	JAGROOP SINGH		
7	88227211121049	JAGSEER SINGH		
8	88227211121050	MAKHAN SINGH		
9	88227211121051	MALKEET SINGH		
10	88227211121054	PARMINDER SINGH		
11	88227211121055	SAHIBJIT SINGH		
12	88227211121056	SUKHWANT SINGH		
13	88227211121057	SUMIT		
14	88227211121058	TARANVEER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 128 / FITTER

Class: Second

Subject : 44444 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 128 / FITTER

Class: Second

Subject : 44445 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88227211121042	GAGANDEEP SINGH		
2	88227211121043	GAGANDEEP SINGH		
3	88227211121045	GURPREET SINGH		
4	88227211121046	GURPREET SINGH KALER		
5	88227211121047	HUSANDEEP SINGH		
6	88227211121048	JAGROOP SINGH		
7	88227211121049	JAGSEER SINGH		
8	88227211121050	MAKHAN SINGH		
9	88227211121051	MALKEET SINGH		
10	88227211121054	PARMINDER SINGH		
11	88227211121055	SAHIBJIT SINGH		
12	88227211121056	SUKHWANT SINGH		
13	88227211121057	SUMIT		
14	88227211121058	TARANVEER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 128 / FITTER

Class: Second

Subject : 44445 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 132 / ELECTRICIAN

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231217822001	ANMOL SHARMA		
2	88231217822003	DALWINDER SINGH		
3	88231217822005	GURSHRAN SINGH		
4	88231217822006	HONEY		
5	88231217822007	JASKARAN SINGH		
6	88231217822008	JASMEET SINGH		
7	88231217822009	KARANDEEP SINGH		
8	88231217822011	KULWINDER SINGH		
9	88231217822012	KUNAL		
10	88231217822013	LOVEPREET SINGH		
11	88231217822014	LOVEPREET SINGH		
12	88231217822015	MALKIT SINGH		
13	88231217822016	MOHAN SINGH		
14	88231217822017	PARDEEP SINGH		
15	88231217822018	PRINCE		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 132 / ELECTRICIAN

Class: First

Subject : 44431 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 132 / ELECTRICIAN

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231217822001	ANMOL SHARMA		
2	88231217822003	DALWINDER SINGH		
3	88231217822005	GURSHRAN SINGH		
4	88231217822006	HONEY		
5	88231217822007	JASKARAN SINGH		
6	88231217822008	JASMEET SINGH		
7	88231217822009	KARANDEEP SINGH		
8	88231217822011	KULWINDER SINGH		
9	88231217822012	KUNAL		
10	88231217822013	LOVEPREET SINGH		
11	88231217822014	LOVEPREET SINGH		
12	88231217822015	MALKIT SINGH		
13	88231217822016	MOHAN SINGH		
14	88231217822017	PARDEEP SINGH		
15	88231217822018	PRINCE		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 132 / ELECTRICIAN

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 132 / ELECTRICIAN

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231217822001	ANMOL SHARMA		
2	88231217822003	DALWINDER SINGH		
3	88231217822005	GURSHRAN SINGH		
4	88231217822006	HONEY		
5	88231217822007	JASKARAN SINGH		
6	88231217822008	JASMEET SINGH		
7	88231217822009	KARANDEEP SINGH		
8	88231217822011	KULWINDER SINGH		
9	88231217822012	KUNAL		
10	88231217822013	LOVEPREET SINGH		
11	88231217822014	LOVEPREET SINGH		
12	88231217822015	MALKIT SINGH		
13	88231217822016	MOHAN SINGH		
14	88231217822017	PARDEEP SINGH		
15	88231217822018	PRINCE		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 132 / ELECTRICIAN

Class: First

Subject : 44435 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44441 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231211121061	AVTAR SINGH		
2	88231211121062	GURDEEP SINGH		
3	88231211121063	GURJANT SINGH		
4	88231211121064	HAPPYPREET SINGH		
5	88231211121065	HARJIT SINGH		
6	88231211121066	HARMANDEEP SINGH		
7	88231211121067	HARWINDER SINGH		
8	88231211121068	KARAN SINGH		
9	88231211121069	KULBIR SINGH		
10	88231211121071	NAMNEET SINGH		
11	88231211121072	NAVDEEP SINGH		
12	88231211121073	NAVDEEP SINGH		
13	88231211121074	PARTAP SINGH		
14	88231211121075	PUNJAB SINGH		
15	88231211121076	SATGUR SINGH		
16	88231211121077	SHAMSHER SINGH		
17	88231211121079	SUKHJIT KAUR		
18	88231211121080	SUKHVEER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44441 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44444 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231211121061	AVTAR SINGH		
2	88231211121062	GURDEEP SINGH		
3	88231211121063	GURJANT SINGH		
4	88231211121064	HAPPYPREET SINGH		
5	88231211121065	HARJIT SINGH		
6	88231211121066	HARMANDEEP SINGH		
7	88231211121067	HARWINDER SINGH		
8	88231211121068	KARAN SINGH		
9	88231211121069	KULBIR SINGH		
10	88231211121071	NAMNEET SINGH		
11	88231211121072	NAVDEEP SINGH		
12	88231211121073	NAVDEEP SINGH		
13	88231211121074	PARTAP SINGH		
14	88231211121075	PUNJAB SINGH		
15	88231211121076	SATGUR SINGH		
16	88231211121077	SHAMSHER SINGH		
17	88231211121079	SUKHJIT KAUR		
18	88231211121080	SUKHVEER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44444 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44445 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231211121061	AVTAR SINGH		
2	88231211121062	GURDEEP SINGH		
3	88231211121063	GURJANT SINGH		
4	88231211121064	HAPPYPREET SINGH		
5	88231211121065	HARJIT SINGH		
6	88231211121066	HARMANDEEP SINGH		
7	88231211121067	HARWINDER SINGH		
8	88231211121068	KARAN SINGH		
9	88231211121069	KULBIR SINGH		
10	88231211121071	NAMNEET SINGH		
11	88231211121072	NAVDEEP SINGH		
12	88231211121073	NAVDEEP SINGH		
13	88231211121074	PARTAP SINGH		
14	88231211121075	PUNJAB SINGH		
15	88231211121076	SATGUR SINGH		
16	88231211121077	SHAMSHER SINGH		
17	88231211121079	SUKHJIT KAUR		
18	88231211121080	SUKHVEER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44445 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17511 / PRINCIPLE OF EDUCATION

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175111222001	AMANDEEP KAUR		
2	88175111222002	AMANJOT RANI		
3	88175111222003	BALVIR KAUR		
4	88175111222004	BUSHRA BEGUM		
5	88175111222005	DHARMPAL KAUR		
6	88175111222006	DIPALI SHARMA		
7	88175111222007	GURDEEP KAUR		
8	88175111222008	GURMINDER KAUR		
9	88175111222009	HARJINDER KAUR		
10	88175111222010	HARKIRAT KAUR		
11	88175111222011	HARVINDER KAUR		
12	88175111222012	HEENA		
13	88175111222013	INDERJEET KAUR		
14	88175111222014	JASHANDEEP KAUR		
15	88175111222016	JASLEEN KAUR		
16	88175111222017	JASPREET KAUR		
17	88175111222018	JASPREET KAUR		
18	88175111222019	JASPREET KAUR		
19	88175111222020	JASPREET KAUR		
20	88175111222023	KAMALJEET KAUR.		
21	88175111222024	KULDEEP KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17511 / PRINCIPLE OF EDUCATION

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88175111222026	MANPREET KAUR		
23	88175111222027	MANPREET KAUR		
24	88175111222028	NAVJEET KAUR		
25	88175111222029	PARMINDER KAUR		
26	88175111222031	POOJA DEVI		
27	88175111222033	RENUKA		
28	88175111222034	SANDEEP KAUR		
29	88175111222035	SANDEEP KAUR		
30	88175111222036	SHABNAM		
31	88175111222037	SHELLY		
32	88175111222038	SHIVATI		
33	88175111222039	SUKHWINDER KAUR		
34	88175111222040	SUMANPREET KAUR		
35	88175116422001	GAGANDEEP KAUR		
36	88175116422002	HARPREET KAUR		
37	88175116422003	JASHANDEEP KAUR		
38	88175116422004	JASPREET KAUR		
39	88175116422005	JASVEER KAUR		
40	88175116422006	JASWINDER KAUR.		
41	88175116422007	JYOTI		
42	88175116422008	KAMALPREET KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17511 / PRINCIPLE OF EDUCATION

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
43	88175116422009	KAMALPREET KAUR		
44	88175116422011	MEHAK		
45	88175116422012	PARNEET KAUR		
46	88175116422013	RAJVINDER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17512 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175111222001	AMANDEEP KAUR		
2	88175111222002	AMANJOT RANI		
3	88175111222003	BALVIR KAUR		
4	88175111222004	BUSHRA BEGUM		
5	88175111222005	DHARMPAL KAUR		
6	88175111222006	DIPALI SHARMA		
7	88175111222007	GURDEEP KAUR		
8	88175111222008	GURMINDER KAUR		
9	88175111222009	HARJINDER KAUR		
10	88175111222010	HARKIRAT KAUR		
11	88175111222011	HARVINDER KAUR		
12	88175111222012	HEENA		
13	88175111222013	INDERJEET KAUR		
14	88175111222014	JASHANDEEP KAUR		
15	88175111222016	JASLEEN KAUR		
16	88175111222017	JASPREET KAUR		
17	88175111222018	JASPREET KAUR		
18	88175111222019	JASPREET KAUR		
19	88175111222020	JASPREET KAUR		
20	88175111222023	KAMALJEET KAUR.		
21	88175111222024	KULDEEP KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17512 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88175111222026	MANPREET KAUR		
23	88175111222027	MANPREET KAUR		
24	88175111222028	NAVJEET KAUR		
25	88175111222029	PARMINDER KAUR		
26	88175111222031	POOJA DEVI		
27	88175111222033	RENUKA		
28	88175111222034	SANDEEP KAUR		
29	88175111222035	SANDEEP KAUR		
30	88175111222036	SHABNAM		
31	88175111222037	SHELLY		
32	88175111222038	SHIVATI		
33	88175111222039	SUKHWINDER KAUR		
34	88175111222040	SUMANPREET KAUR		
35	88175116419003	GURPREET KAUR		
36	88175116419010	MANDEEP KAUR		
37	88175116420008	PALLVI		
38	88175116422001	GAGANDEEP KAUR		
39	88175116422002	HARPREET KAUR		
40	88175116422003	JASHANDEEP KAUR		
41	88175116422004	JASPREET KAUR		
42	88175116422005	JASVEER KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17512 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
43	88175116422006	JASWINDER KAUR.		
44	88175116422007	JYOTI		
45	88175116422008	KAMALPREET KAUR		
46	88175116422009	KAMALPREET KAUR		
47	88175116422011	MEHAK		
48	88175116422012	PARNEET KAUR		
49	88175116422013	RAJVINDER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17513 / PRACTICE OF TEACHING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175111222001	AMANDEEP KAUR		
2	88175111222002	AMANJOT RANI		
3	88175111222003	BALVIR KAUR		
4	88175111222004	BUSHRA BEGUM		
5	88175111222005	DHARMPAL KAUR		
6	88175111222006	DIPALI SHARMA		
7	88175111222007	GURDEEP KAUR		
8	88175111222008	GURMINDER KAUR		
9	88175111222009	HARJINDER KAUR		
10	88175111222010	HARKIRAT KAUR		
11	88175111222011	HARVINDER KAUR		
12	88175111222012	HEENA		
13	88175111222013	INDERJEET KAUR		
14	88175111222014	JASHANDEEP KAUR		
15	88175111222016	JASLEEN KAUR		
16	88175111222017	JASPREET KAUR		
17	88175111222018	JASPREET KAUR		
18	88175111222019	JASPREET KAUR		
19	88175111222020	JASPREET KAUR		
20	88175111222023	KAMALJEET KAUR.		
21	88175111222024	KULDEEP KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17513 / PRACTICE OF TEACHING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88175111222026	MANPREET KAUR		
23	88175111222027	MANPREET KAUR		
24	88175111222028	NAVJEET KAUR		
25	88175111222029	PARMINDER KAUR		
26	88175111222031	POOJA DEVI		
27	88175111222033	RENUKA		
28	88175111222034	SANDEEP KAUR		
29	88175111222035	SANDEEP KAUR		
30	88175111222036	SHABNAM		
31	88175111222037	SHELLY		
32	88175111222038	SHIVATI		
33	88175111222039	SUKHWINDER KAUR		
34	88175111222040	SUMANPREET KAUR		
35	88175116422001	GAGANDEEP KAUR		
36	88175116422002	HARPREET KAUR		
37	88175116422003	JASHANDEEP KAUR		
38	88175116422004	JASPREET KAUR		
39	88175116422005	JASVEER KAUR		
40	88175116422006	JASWINDER KAUR.		
41	88175116422007	JYOTI		
42	88175116422008	KAMALPREET KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17513 / PRACTICE OF TEACHING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
43	88175116422009	KAMALPREET KAUR		
44	88175116422011	MEHAK		
45	88175116422012	PARNEET KAUR		
46	88175116422013	RAJVINDER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17525 / PRACTICAL IV-A (MEN GARMENTS)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175111222001	AMANDEEP KAUR		
2	88175111222002	AMANJOT RANI		
3	88175111222003	BALVIR KAUR		
4	88175111222004	BUSHRA BEGUM		
5	88175111222005	DHARMPAL KAUR		
6	88175111222006	DIPALI SHARMA		
7	88175111222007	GURDEEP KAUR		
8	88175111222008	GURMINDER KAUR		
9	88175111222009	HARJINDER KAUR		
10	88175111222010	HARKIRAT KAUR		
11	88175111222011	HARVINDER KAUR		
12	88175111222012	HEENA		
13	88175111222013	INDERJEET KAUR		
14	88175111222014	JASHANDEEP KAUR		
15	88175111222016	JASLEEN KAUR		
16	88175111222017	JASPREET KAUR		
17	88175111222018	JASPREET KAUR		
18	88175111222019	JASPREET KAUR		
19	88175111222020	JASPREET KAUR		
20	88175111222023	KAMALJEET KAUR.		
21	88175111222024	KULDEEP KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17525 / PRACTICAL IV-A (MEN GARMENTS)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88175111222026	MANPREET KAUR		
23	88175111222027	MANPREET KAUR		
24	88175111222028	NAVJEET KAUR		
25	88175111222029	PARMINDER KAUR		
26	88175111222031	POOJA DEVI		
27	88175111222033	RENUKA		
28	88175111222034	SANDEEP KAUR		
29	88175111222035	SANDEEP KAUR		
30	88175111222036	SHABNAM		
31	88175111222037	SHELLY		
32	88175111222038	SHIVATI		
33	88175111222039	SUKHWINDER KAUR		
34	88175111222040	SUMANPREET KAUR		
35	88175116422001	GAGANDEEP KAUR		
36	88175116422002	HARPREET KAUR		
37	88175116422003	JASHANDEEP KAUR		
38	88175116422004	JASPREET KAUR		
39	88175116422005	JASVEER KAUR		
40	88175116422006	JASWINDER KAUR.		
41	88175116422007	JYOTI		
42	88175116422008	KAMALPREET KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17525 / PRACTICAL IV-A (MEN GARMENTS)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
43	88175116422009	KAMALPREET KAUR		
44	88175116422011	MEHAK		
45	88175116422012	PARNEET KAUR		
46	88175116422013	RAJVINDER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17526 / PRACTICAL IV-B (WOMEN GARMENTS)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175111222001	AMANDEEP KAUR		
2	88175111222002	AMANJOT RANI		
3	88175111222003	BALVIR KAUR		
4	88175111222004	BUSHRA BEGUM		
5	88175111222005	DHARMPAL KAUR		
6	88175111222006	DIPALI SHARMA		
7	88175111222007	GURDEEP KAUR		
8	88175111222008	GURMINDER KAUR		
9	88175111222009	HARJINDER KAUR		
10	88175111222010	HARKIRAT KAUR		
11	88175111222011	HARVINDER KAUR		
12	88175111222012	HEENA		
13	88175111222013	INDERJEET KAUR		
14	88175111222014	JASHANDEEP KAUR		
15	88175111222016	JASLEEN KAUR		
16	88175111222017	JASPREET KAUR		
17	88175111222018	JASPREET KAUR		
18	88175111222019	JASPREET KAUR		
19	88175111222020	JASPREET KAUR		
20	88175111222023	KAMALJEET KAUR.		
21	88175111222024	KULDEEP KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17526 / PRACTICAL IV-B (WOMEN GARMENTS)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88175111222026	MANPREET KAUR		
23	88175111222027	MANPREET KAUR		
24	88175111222028	NAVJEET KAUR		
25	88175111222029	PARMINDER KAUR		
26	88175111222031	POOJA DEVI		
27	88175111222033	RENUKA		
28	88175111222034	SANDEEP KAUR		
29	88175111222035	SANDEEP KAUR		
30	88175111222036	SHABNAM		
31	88175111222037	SHELLY		
32	88175111222038	SHIVATI		
33	88175111222039	SUKHWINDER KAUR		
34	88175111222040	SUMANPREET KAUR		
35	88175116422001	GAGANDEEP KAUR		
36	88175116422002	HARPREET KAUR		
37	88175116422003	JASHANDEEP KAUR		
38	88175116422004	JASPREET KAUR		
39	88175116422005	JASVEER KAUR		
40	88175116422006	JASWINDER KAUR.		
41	88175116422007	JYOTI		
42	88175116422008	KAMALPREET KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17526 / PRACTICAL IV-B (WOMEN GARMENTS)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
43	88175116422009	KAMALPREET KAUR		
44	88175116422011	MEHAK		
45	88175116422012	PARNEET KAUR		
46	88175116422013	RAJVINDER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17527 / PRACTICAL IV-C (CHILD. GARMENTS)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175111222001	AMANDEEP KAUR		
2	88175111222002	AMANJOT RANI		
3	88175111222003	BALVIR KAUR		
4	88175111222004	BUSHRA BEGUM		
5	88175111222005	DHARMPAL KAUR		
6	88175111222006	DIPALI SHARMA		
7	88175111222007	GURDEEP KAUR		
8	88175111222008	GURMINDER KAUR		
9	88175111222009	HARJINDER KAUR		
10	88175111222010	HARKIRAT KAUR		
11	88175111222011	HARVINDER KAUR		
12	88175111222012	HEENA		
13	88175111222013	INDERJEET KAUR		
14	88175111222014	JASHANDEEP KAUR		
15	88175111222016	JASLEEN KAUR		
16	88175111222017	JASPREET KAUR		
17	88175111222018	JASPREET KAUR		
18	88175111222019	JASPREET KAUR		
19	88175111222020	JASPREET KAUR		
20	88175111222023	KAMALJEET KAUR.		
21	88175111222024	KULDEEP KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17527 / PRACTICAL IV-C (CHILD. GARMENTS)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88175111222026	MANPREET KAUR		
23	88175111222027	MANPREET KAUR		
24	88175111222028	NAVJEET KAUR		
25	88175111222029	PARMINDER KAUR		
26	88175111222031	POOJA DEVI		
27	88175111222033	RENUKA		
28	88175111222034	SANDEEP KAUR		
29	88175111222035	SANDEEP KAUR		
30	88175111222036	SHABNAM		
31	88175111222037	SHELLY		
32	88175111222038	SHIVATI		
33	88175111222039	SUKHWINDER KAUR		
34	88175111222040	SUMANPREET KAUR		
35	88175116422001	GAGANDEEP KAUR		
36	88175116422002	HARPREET KAUR		
37	88175116422003	JASHANDEEP KAUR		
38	88175116422004	JASPREET KAUR		
39	88175116422005	JASVEER KAUR		
40	88175116422006	JASWINDER KAUR.		
41	88175116422007	JYOTI		
42	88175116422008	KAMALPREET KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17527 / PRACTICAL IV-C (CHILD. GARMENTS)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
43	88175116422009	KAMALPREET KAUR		
44	88175116422011	MEHAK		
45	88175116422012	PARNEET KAUR		
46	88175116422013	RAJVINDER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17528 / SCHEME WORK

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175111222001	AMANDEEP KAUR		
2	88175111222002	AMANJOT RANI		
3	88175111222003	BALVIR KAUR		
4	88175111222004	BUSHRA BEGUM		
5	88175111222005	DHARMPAL KAUR		
6	88175111222006	DIPALI SHARMA		
7	88175111222007	GURDEEP KAUR		
8	88175111222008	GURMINDER KAUR		
9	88175111222009	HARJINDER KAUR		
10	88175111222010	HARKIRAT KAUR		
11	88175111222011	HARVINDER KAUR		
12	88175111222012	HEENA		
13	88175111222013	INDERJEET KAUR		
14	88175111222014	JASHANDEEP KAUR		
15	88175111222016	JASLEEN KAUR		
16	88175111222017	JASPREET KAUR		
17	88175111222018	JASPREET KAUR		
18	88175111222019	JASPREET KAUR		
19	88175111222020	JASPREET KAUR		
20	88175111222023	KAMALJEET KAUR.		
21	88175111222024	KULDEEP KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17528 / SCHEME WORK

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88175111222026	MANPREET KAUR		
23	88175111222027	MANPREET KAUR		
24	88175111222028	NAVJEET KAUR		
25	88175111222029	PARMINDER KAUR		
26	88175111222031	POOJA DEVI		
27	88175111222033	RENUKA		
28	88175111222034	SANDEEP KAUR		
29	88175111222035	SANDEEP KAUR		
30	88175111222036	SHABNAM		
31	88175111222037	SHELLY		
32	88175111222038	SHIVATI		
33	88175111222039	SUKHWINDER KAUR		
34	88175111222040	SUMANPREET KAUR		
35	88175116422001	GAGANDEEP KAUR		
36	88175116422002	HARPREET KAUR		
37	88175116422003	JASHANDEEP KAUR		
38	88175116422004	JASPREET KAUR		
39	88175116422005	JASVEER KAUR		
40	88175116422006	JASWINDER KAUR.		
41	88175116422007	JYOTI		
42	88175116422008	KAMALPREET KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17528 / SCHEME WORK

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
43	88175116422009	KAMALPREET KAUR		
44	88175116422011	MEHAK		
45	88175116422012	PARNEET KAUR		
46	88175116422013	RAJVINDER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 660 / WELDER

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88212117821031	LOVEPREET SINGH		
2	88212117822027	HARPREET SINGH		
3	88212117822030	MALWINDER		
4	88212117822031	PARDEEP KAUR		
5	88212117822034	RAHUL KUMAR		
6	88212117822035	RANINDER SINGH		
7	88212117822038	SUGAM		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 660 / WELDER

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88212117822027	HARPREET SINGH		
2	88212117822030	MALWINDER		
3	88212117822031	PARDEEP KAUR		
4	88212117822034	RAHUL KUMAR		
5	88212117822035	RANINDER SINGH		
6	88212117822038	SUGAM		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 660 / WELDER

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88212117822027	HARPREET SINGH		
2	88212117822030	MALWINDER		
3	88212117822031	PARDEEP KAUR		
4	88212117822034	RAHUL KUMAR		
5	88212117822035	RANINDER SINGH		
6	88212117822038	SUGAM		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 664 / PUNJABI STENOGRAPHY

Class: First

Subject : 17411 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88174111121007	CHUNAL JINDAL		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 675 / SOLAR TECHNICIAN (ELECTRICAL) Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88288111122001	AJAY KUMAR		
2	88288111122002	ANANT SINGH		
3	88288111122003	BEANT SINGH		
4	88288111122004	GAGANDEEP SINGH		
5	88288111122005	GAGANDEEP VERMA		
6	88288111122006	GURDHIYAN SINGH		
7	88288111122007	GURPREET SINGH		
8	88288111122008	HAPPY SINGH		
9	88288111122009	HARMANPREET SINGH		
10	88288111122010	JATIN		
11	88288111122011	JOGA SINGH		
12	88288111122012	KULDEEP SINGH		
13	88288111122013	PRINCE KUMAR		
14	88288111122014	RAKESH KUMAR		
15	88288111122015	RAVI KUMAR		
16	88288111122017	ROHIT GIR		
17	88288111122018	SATNAM SINGH		
18	88288111122019	SUKHJIT SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 675 / SOLAR TECHNICIAN (ELECTRICAL) Class: First

Subject : 44431 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 675 / SOLAR TECHNICIAN (ELECTRICAL) Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88288111122001	AJAY KUMAR		
2	88288111122002	ANANT SINGH		
3	88288111122003	BEANT SINGH		
4	88288111122004	GAGANDEEP SINGH		
5	88288111122005	GAGANDEEP VERMA		
6	88288111122006	GURDHIYAN SINGH		
7	88288111122007	GURPREET SINGH		
8	88288111122008	HAPPY SINGH		
9	88288111122009	HARMANPREET SINGH		
10	88288111122010	JATIN		
11	88288111122011	JOGA SINGH		
12	88288111122012	KULDEEP SINGH		
13	88288111122013	PRINCE KUMAR		
14	88288111122014	RAKESH KUMAR		
15	88288111122015	RAVI KUMAR		
16	88288111122017	ROHIT GIR		
17	88288111122018	SATNAM SINGH		
18	88288111122019	SUKHJIT SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 675 / SOLAR TECHNICIAN (ELECTRICAL) Class: First

Subject : 44434 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 675 / SOLAR TECHNICIAN (ELECTRICAL) Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88288111122001	AJAY KUMAR		
2	88288111122002	ANANT SINGH		
3	88288111122003	BEANT SINGH		
4	88288111122004	GAGANDEEP SINGH		
5	88288111122005	GAGANDEEP VERMA		
6	88288111122006	GURDHIYAN SINGH		
7	88288111122007	GURPREET SINGH		
8	88288111122008	HAPPY SINGH		
9	88288111122009	HARMANPREET SINGH		
10	88288111122010	JATIN		
11	88288111122011	JOGA SINGH		
12	88288111122012	KULDEEP SINGH		
13	88288111122013	PRINCE KUMAR		
14	88288111122014	RAKESH KUMAR		
15	88288111122015	RAVI KUMAR		
16	88288111122017	ROHIT GIR		
17	88288111122018	SATNAM SINGH		
18	88288111122019	SUKHJIT SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 675 / SOLAR TECHNICIAN (ELECTRICAL) Class: First

Subject : 44435 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 680 / HUMAN RESOURCE EXECUTIVE

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88289111222041	AMANDEEP KAUR		
2	88289111222042	AMANPREET KAUR		
3	88289111222044	ARSHDEEP KAUR		
4	88289111222045	AVIKA		
5	88289111222046	DEEPIKA		
6	88289111222047	DILPREET KAUR		
7	88289111222048	GAGANDEEP KAUR		
8	88289111222050	HARDEEP KAUR		
9	88289111222051	KAMALJEET KAUR		
10	88289111222052	KHUSHBOO		
11	88289111222053	KULJINDER KAUR		
12	88289111222055	NINDER KAUR		
13	88289111222056	NISHA RANI		
14	88289111222058	PRIYA KUMARI		
15	88289111222059	RAJWINDER KAUR		
16	88289111222060	RAJWINDER KAUR		
17	88289111222061	RAMANPREET KAUR		
18	88289111222062	SAKHSHI		
19	88289111222063	SARABJIT KAUR		
20	88289111222064	SUNAYANA MEHRA		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 680 / HUMAN RESOURCE EXECUTIVE

Class: First

Subject : 44431 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 680 / HUMAN RESOURCE EXECUTIVE

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88289111222041	AMANDEEP KAUR		
2	88289111222042	AMANPREET KAUR		
3	88289111222044	ARSHDEEP KAUR		
4	88289111222045	AVIKA		
5	88289111222046	DEEPIKA		
6	88289111222047	DILPREET KAUR		
7	88289111222048	GAGANDEEP KAUR		
8	88289111222050	HARDEEP KAUR		
9	88289111222051	KAMALJEET KAUR		
10	88289111222052	KHUSHBOO		
11	88289111222053	KULJINDER KAUR		
12	88289111222055	NINDER KAUR		
13	88289111222056	NISHA RANI		
14	88289111222058	PRIYA KUMARI		
15	88289111222059	RAJWINDER KAUR		
16	88289111222060	RAJWINDER KAUR		
17	88289111222061	RAMANPREET KAUR		
18	88289111222062	SAKHSHI		
19	88289111222063	SARABJIT KAUR		
20	88289111222064	SUNAYANA MEHRA		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 680 / HUMAN RESOURCE EXECUTIVE

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 680 / HUMAN RESOURCE EXECUTIVE

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88289111222041	AMANDEEP KAUR		
2	88289111222042	AMANPREET KAUR		
3	88289111222044	ARSHDEEP KAUR		
4	88289111222045	AVIKA		
5	88289111222046	DEEPIKA		
6	88289111222047	DILPREET KAUR		
7	88289111222048	GAGANDEEP KAUR		
8	88289111222050	HARDEEP KAUR		
9	88289111222051	KAMALJEET KAUR		
10	88289111222052	KHUSHBOO		
11	88289111222053	KULJINDER KAUR		
12	88289111222055	NINDER KAUR		
13	88289111222056	NISHA RANI		
14	88289111222058	PRIYA KUMARI		
15	88289111222059	RAJWINDER KAUR		
16	88289111222060	RAJWINDER KAUR		
17	88289111222061	RAMANPREET KAUR		
18	88289111222062	SAKHSHI		
19	88289111222063	SARABJIT KAUR		
20	88289111222064	SUNAYANA MEHRA		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1214 / INDUSTRIAL TRAINING INSTITUTE , PATIALA

Course : 680 / HUMAN RESOURCE EXECUTIVE

Class: First

Subject : 44435 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 370 / ART & CRAFTS

Class: First

Subject : 17055 / CRAFT (T)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370116118002	SOURAV SROYE		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 370 / ART & CRAFTS

Class: First

Subject : 17073 / GEOMETRICAL DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370116118002	SOURAV SROYE		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 370 / ART & CRAFTS

Class: Second

Subject : 70055 / CRAFT (T)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370116117005	MANJOT KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 370 / ART & CRAFTS

Class: Second

Subject : 70070 / EDUCATIONAL PSYCHOLOGY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370116117002	HARPREET SINGH		
2	88370116117004	KANIKA		
3	88370116117005	MANJOT KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 370 / ART & CRAFTS

Class: Second

Subject : 70071 / HISTORY & APPRECIATION OF ART

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370116117002	HARPREET SINGH		
2	88370116117004	KANIKA		
3	88370116117005	MANJOT KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 370 / ART & CRAFTS

Class: Second

Subject : 70072 / COMMERCIAL ART

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370116117004	KANIKA		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 370 / ART & CRAFTS

Class: Second

Subject : 70073 / SCALE & PERSPECTIVE DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370116117001	GURREET SINGH		
2	88370116117004	KANIKA		
3	88370116117005	MANJOT KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 651 / COSMETOLOGY

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88239111422001	AMANDEEP KAUR		
2	88239111422002	ANU		
3	88239111422003	ANUPREET KAUR		
4	88239111422004	ARWINDER KAUR		
5	88239111422005	ASHU RANI		
6	88239111422006	DIKSHA		
7	88239111422007	DIPAKSHI		
8	88239111422008	HARDEEP KAUR		
9	88239111422009	HARJEET KAUR		
10	88239111422010	HARPREET KAUR		
11	88239111422011	HARSHDEEP KAUR		
12	88239111422013	HEMA RANI		
13	88239111422014	KHUSHPREET KAUR		
14	88239111422015	KOMALPREET KAUR		
15	88239111422016	LADDI KAUR		
16	88239111422017	MANISHA KUMARI		
17	88239111422018	MANISHA RANI		
18	88239111422019	MANISHA RANI		
19	88239111422020	MANJEET KAUR		
20	88239111422021	MANPREET KAUR		
21	88239111422022	MANSI		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 651 / COSMETOLOGY

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88239111422023	MANUPRIYA		
23	88239111422025	MEHRUSA		
24	88239111422026	MUSKAN		
25	88239111422027	MUSKAN BEDI		
26	88239111422028	NAVNEET KAUR		
27	88239111422030	NISHA RANI		
28	88239111422031	PARVEEN KAUR		
29	88239111422032	POOJA DEVI		
30	88239111422033	POOJA RANI		
31	88239111422034	PRERNA RANI		
32	88239111422035	PRIYANKA SHARMA		
33	88239111422036	RAMANPREET KAUR		
34	88239111422037	RANJEET KAUR		
35	88239111422038	SANDEEP KAUR		
36	88239111422039	SANJANA		
37	88239111422040	SEEMA DEVI		
38	88239111422041	SHIVANI DEVI		
39	88239111422042	SIMRANJEET KAUR		
40	88239111422043	SIMRANJIT KAUR		
41	88239111422044	SONIA		
42	88239111422045	SONIA		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 651 / COSMETOLOGY

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
43	88239111422046	SUKHWINDER KAUR		
44	88239111422047	SUMAN KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 651 / COSMETOLOGY

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88239111422001	AMANDEEP KAUR		
2	88239111422002	ANU		
3	88239111422003	ANUPREET KAUR		
4	88239111422004	ARWINDER KAUR		
5	88239111422005	ASHU RANI		
6	88239111422006	DIKSHA		
7	88239111422007	DIPAKSHI		
8	88239111422008	HARDEEP KAUR		
9	88239111422009	HARJEET KAUR		
10	88239111422010	HARPREET KAUR		
11	88239111422011	HARSHDEEP KAUR		
12	88239111422013	HEMA RANI		
13	88239111422014	KHUSHPREET KAUR		
14	88239111422015	KOMALPREET KAUR		
15	88239111422016	LADDI KAUR		
16	88239111422017	MANISHA KUMARI		
17	88239111422018	MANISHA RANI		
18	88239111422019	MANISHA RANI		
19	88239111422020	MANJEET KAUR		
20	88239111422021	MANPREET KAUR		
21	88239111422022	MANSI		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 651 / COSMETOLOGY

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88239111422023	MANUPRIYA		
23	88239111422025	MEHRUSA		
24	88239111422026	MUSKAN		
25	88239111422027	MUSKAN BEDI		
26	88239111422028	NAVNEET KAUR		
27	88239111422030	NISHA RANI		
28	88239111422031	PARVEEN KAUR		
29	88239111422032	POOJA DEVI		
30	88239111422033	POOJA RANI		
31	88239111422034	PRERNA RANI		
32	88239111422035	PRIYANKA SHARMA		
33	88239111422036	RAMANPREET KAUR		
34	88239111422037	RANJEET KAUR		
35	88239111422038	SANDEEP KAUR		
36	88239111422039	SANJANA		
37	88239111422040	SEEMA DEVI		
38	88239111422041	SHIVANI DEVI		
39	88239111422042	SIMRANJEET KAUR		
40	88239111422043	SIMRANJIT KAUR		
41	88239111422044	SONIA		
42	88239111422045	SONIA		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 651 / COSMETOLOGY

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
43	88239111422046	SUKHWINDER KAUR		
44	88239111422047	SUMAN KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 651 / COSMETOLOGY

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88239111422001	AMANDEEP KAUR		
2	88239111422002	ANU		
3	88239111422003	ANUPREET KAUR		
4	88239111422004	ARWINDER KAUR		
5	88239111422005	ASHU RANI		
6	88239111422006	DIKSHA		
7	88239111422007	DIPAKSHI		
8	88239111422008	HARDEEP KAUR		
9	88239111422009	HARJEET KAUR		
10	88239111422010	HARPREET KAUR		
11	88239111422011	HARSHDEEP KAUR		
12	88239111422013	HEMA RANI		
13	88239111422014	KHUSHPREET KAUR		
14	88239111422015	KOMALPREET KAUR		
15	88239111422016	LADDI KAUR		
16	88239111422017	MANISHA KUMARI		
17	88239111422018	MANISHA RANI		
18	88239111422019	MANISHA RANI		
19	88239111422020	MANJEET KAUR		
20	88239111422021	MANPREET KAUR		
21	88239111422022	MANSI		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 651 / COSMETOLOGY

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88239111422023	MANUPRIYA		
23	88239111422025	MEHRUSA		
24	88239111422026	MUSKAN		
25	88239111422027	MUSKAN BEDI		
26	88239111422028	NAVNEET KAUR		
27	88239111422030	NISHA RANI		
28	88239111422031	PARVEEN KAUR		
29	88239111422032	POOJA DEVI		
30	88239111422033	POOJA RANI		
31	88239111422034	PRERNA RANI		
32	88239111422035	PRIYANKA SHARMA		
33	88239111422036	RAMANPREET KAUR		
34	88239111422037	RANJEET KAUR		
35	88239111422038	SANDEEP KAUR		
36	88239111422039	SANJANA		
37	88239111422040	SEEMA DEVI		
38	88239111422041	SHIVANI DEVI		
39	88239111422042	SIMRANJEET KAUR		
40	88239111422043	SIMRANJIT KAUR		
41	88239111422044	SONIA		
42	88239111422045	SONIA		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 651 / COSMETOLOGY

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
43	88239111422046	SUKHWINDER KAUR		
44	88239111422047	SUMAN KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 652 / FASHION DESIGN TECHNOLOGY

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88246111422049	AMANPREET KAUR		
2	88246111422050	GURPREET KAUR		
3	88246111422053	HARMANPREET KAUR		
4	88246111422054	KIRANDEEP KAUR		
5	88246111422057	MANPREET KAUR		
6	88246111422058	MANPREET KAUR		
7	88246111422060	PARWINDER KAUR		
8	88246111422061	PREETY SHARMA		
9	88246111422063	SAKEENA		
10	88246111422064	SONI		
11	88246111422065	TANIYA		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 652 / FASHION DESIGN TECHNOLOGY

Class: First

Subject : 44431 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 652 / FASHION DESIGN TECHNOLOGY

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88246111422049	AMANPREET KAUR		
2	88246111422050	GURPREET KAUR		
3	88246111422053	HARMANPREET KAUR		
4	88246111422054	KIRANDEEP KAUR		
5	88246111422057	MANPREET KAUR		
6	88246111422058	MANPREET KAUR		
7	88246111422060	PARWINDER KAUR		
8	88246111422061	PREETY SHARMA		
9	88246111422063	SAKEENA		
10	88246111422064	SONI		
11	88246111422065	TANIYA		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 652 / FASHION DESIGN TECHNOLOGY

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 652 / FASHION DESIGN TECHNOLOGY

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88246111422049	AMANPREET KAUR		
2	88246111422050	GURPREET KAUR		
3	88246111422053	HARMANPREET KAUR		
4	88246111422054	KIRANDEEP KAUR		
5	88246111422057	MANPREET KAUR		
6	88246111422058	MANPREET KAUR		
7	88246111422060	PARWINDER KAUR		
8	88246111422061	PREETY SHARMA		
9	88246111422063	SAKEENA		
10	88246111422064	SONI		
11	88246111422065	TANIYA		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 652 / FASHION DESIGN TECHNOLOGY

Class: First

Subject : 44435 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 658 / SEWING TECHNOLOGY

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88247111422066	ANJALI		
2	88247111422067	ANMOLPREET KAUR		
3	88247111422068	HARPREET KAUR		
4	88247111422069	JASHANPREET KAUR		
5	88247111422070	JASVEER KAUR		
6	88247111422072	KIRANDEEP KAUR		
7	88247111422075	RAMANPREET KAUR		
8	88247111422076	SANDEEP KAUR		
9	88247111422077	SATWINDER KAUR		
10	88247111422078	SIMRAN KAUR		
11	88247111422079	SUMAN		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 658 / SEWING TECHNOLOGY

Class: First

Subject : 44431 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 658 / SEWING TECHNOLOGY

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88247111422066	ANJALI		
2	88247111422067	ANMOLPREET KAUR		
3	88247111422068	HARPREET KAUR		
4	88247111422069	JASHANPREET KAUR		
5	88247111422070	JASVEER KAUR		
6	88247111422072	KIRANDEEP KAUR		
7	88247111422075	RAMANPREET KAUR		
8	88247111422076	SANDEEP KAUR		
9	88247111422077	SATWINDER KAUR		
10	88247111422078	SIMRAN KAUR		
11	88247111422079	SUMAN		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 658 / SEWING TECHNOLOGY

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 658 / SEWING TECHNOLOGY

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88247111422066	ANJALI		
2	88247111422067	ANMOLPREET KAUR		
3	88247111422068	HARPREET KAUR		
4	88247111422069	JASHANPREET KAUR		
5	88247111422070	JASVEER KAUR		
6	88247111422072	KIRANDEEP KAUR		
7	88247111422075	RAMANPREET KAUR		
8	88247111422076	SANDEEP KAUR		
9	88247111422077	SATWINDER KAUR		
10	88247111422078	SIMRAN KAUR		
11	88247111422079	SUMAN		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 658 / SEWING TECHNOLOGY

Class: First

Subject : 44435 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 664 / PUNJABI STENOGRAPHY

Class: First

Subject : 17411 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88174111422080	AMANDEEP KAUR		
2	88174111422081	AMANDEEP KAUR		
3	88174111422082	ANAMIKA		
4	88174111422083	DALVIR KAUR		
5	88174111422084	GEETA		
6	88174111422085	INDERJIT KAUR		
7	88174111422086	JASPREET KAUR		
8	88174111422087	KAMALJEET KAUR		
9	88174111422088	KAMALPREET KAUR		
10	88174111422089	KIRANJEET KAUR		
11	88174111422090	KOMALPREET KAUR		
12	88174111422091	LOVEPREET KAUR		
13	88174111422092	MANPREET KAUR		
14	88174111422093	PARWINDER KAUR		
15	88174111422094	PRIYANKA RANI		
16	88174111422095	PRIYANKA RANI		
17	88174111422096	SAROJPALKAUR		
18	88174111422097	SEEMA RANI		
19	88174111422098	SIMRAN KAUR		
20	88174111422099	SUKHWINDER KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 664 / PUNJABI STENOGRAPHY

Class: First

Subject : 17411 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 664 / PUNJABI STENOGRAPHY

Class: First

Subject : 17414 / SOCIAL STUDIES

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88174111422080	AMANDEEP KAUR		
2	88174111422081	AMANDEEP KAUR		
3	88174111422082	ANAMIKA		
4	88174111422083	DALVIR KAUR		
5	88174111422084	GEETA		
6	88174111422085	INDERJIT KAUR		
7	88174111422086	JASPREET KAUR		
8	88174111422087	KAMALJEET KAUR		
9	88174111422088	KAMALPREET KAUR		
10	88174111422089	KIRANJEET KAUR		
11	88174111422090	KOMALPREET KAUR		
12	88174111422091	LOVEPREET KAUR		
13	88174111422092	MANPREET KAUR		
14	88174111422093	PARWINDER KAUR		
15	88174111422094	PRIYANKA RANI		
16	88174111422095	PRIYANKA RANI		
17	88174111422096	SAROJPALKAUR		
18	88174111422097	SEEMA RANI		
19	88174111422098	SIMRAN KAUR		
20	88174111422099	SUKHWINDER KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 664 / PUNJABI STENOGRAPHY Class: First

Subject : 17414 / SOCIAL STUDIES

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 664 / PUNJABI STENOGRAPHY

Class: First

Subject : 17415 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88174111422080	AMANDEEP KAUR		
2	88174111422081	AMANDEEP KAUR		
3	88174111422082	ANAMIKA		
4	88174111422083	DALVIR KAUR		
5	88174111422084	GEETA		
6	88174111422085	INDERJIT KAUR		
7	88174111422086	JASPREET KAUR		
8	88174111422087	KAMALJEET KAUR		
9	88174111422088	KAMALPREET KAUR		
10	88174111422089	KIRANJEET KAUR		
11	88174111422090	KOMALPREET KAUR		
12	88174111422091	LOVEPREET KAUR		
13	88174111422092	MANPREET KAUR		
14	88174111422093	PARWINDER KAUR		
15	88174111422094	PRIYANKA RANI		
16	88174111422095	PRIYANKA RANI		
17	88174111422096	SAROJPALKAUR		
18	88174111422097	SEEMA RANI		
19	88174111422098	SIMRAN KAUR		
20	88174111422099	SUKHWINDER KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 664 / PUNJABI STENOGRAPHY Class: First

Subject : 17415 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 664 / PUNJABI STENOGRAPHY

Class: First

Subject : 17416 / COGNATE

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88174111422080	AMANDEEP KAUR		
2	88174111422081	AMANDEEP KAUR		
3	88174111422082	ANAMIKA		
4	88174111422083	DALVIR KAUR		
5	88174111422084	GEETA		
6	88174111422085	INDERJIT KAUR		
7	88174111422086	JASPREET KAUR		
8	88174111422087	KAMALJEET KAUR		
9	88174111422088	KAMALPREET KAUR		
10	88174111422089	KIRANJEET KAUR		
11	88174111422090	KOMALPREET KAUR		
12	88174111422091	LOVEPREET KAUR		
13	88174111422092	MANPREET KAUR		
14	88174111422093	PARWINDER KAUR		
15	88174111422094	PRIYANKA RANI		
16	88174111422095	PRIYANKA RANI		
17	88174111422096	SAROJPALKAUR		
18	88174111422097	SEEMA RANI		
19	88174111422098	SIMRAN KAUR		
20	88174111422099	SUKHWINDER KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 664 / PUNJABI STENOGRAPHY Class: First

Subject : 17416 / COGNATE

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17051 / PAINTING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370216122001	BEANT SINGH		
2	88370216122002	BELI RAM		
3	88370216122003	BINDU RAM		
4	88370216122004	DINESH CHAND		
5	88370216122005	GOBIND SINGH		
6	88370216122006	GURDEEP SINGH		
7	88370216122007	KAMAL DEEP		
8	88370216122008	MANOJ KUMAR		
9	88370216122009	MANOJ KUMAR		
10	88370216122010	MURARI LAL		
11	88370216122011	NEK CHAND		
12	88370216122012	PANKAJ		
13	88370216122013	PRADEEP KUMAR		
14	88370216122014	PRAYAG RAJ		
15	88370216122015	RAJAT KUMAR		
16	88370216122016	RESHMA SHARMA		
17	88370216122017	SANJAY KUMAR		
18	88370216122018	SUNIL CHAUHAN		
19	88370216122019	SURENDER SINGH		
20	88370216122020	SURENDER SINGH DILTA		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: First

Subject : 17051 / PAINTING

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17055 / CRAFT (T)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370216122001	BEANT SINGH		
2	88370216122002	BELI RAM		
3	88370216122003	BINDU RAM		
4	88370216122004	DINESH CHAND		
5	88370216122005	GOBIND SINGH		
6	88370216122006	GURDEEP SINGH		
7	88370216122007	KAMAL DEEP		
8	88370216122008	MANOJ KUMAR		
9	88370216122009	MANOJ KUMAR		
10	88370216122010	MURARI LAL		
11	88370216122011	NEK CHAND		
12	88370216122012	PANKAJ		
13	88370216122013	PRADEEP KUMAR		
14	88370216122014	PRAYAG RAJ		
15	88370216122015	RAJAT KUMAR		
16	88370216122016	RESHMA SHARMA		
17	88370216122017	SANJAY KUMAR		
18	88370216122018	SUNIL CHAUHAN		
19	88370216122019	SURENDER SINGH		
20	88370216122020	SURENDER SINGH DILTA		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: First

Subject : 17055 / CRAFT (T)

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17059 / DESIGN

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370216122001	BEANT SINGH		
2	88370216122002	BELI RAM		
3	88370216122003	BINDU RAM		
4	88370216122004	DINESH CHAND		
5	88370216122005	GOBIND SINGH		
6	88370216122006	GURDEEP SINGH		
7	88370216122007	KAMAL DEEP		
8	88370216122008	MANOJ KUMAR		
9	88370216122009	MANOJ KUMAR		
10	88370216122010	MURARI LAL		
11	88370216122011	NEK CHAND		
12	88370216122012	PANKAJ		
13	88370216122013	PRADEEP KUMAR		
14	88370216122014	PRAYAG RAJ		
15	88370216122015	RAJAT KUMAR		
16	88370216122016	RESHMA SHARMA		
17	88370216122017	SANJAY KUMAR		
18	88370216122018	SUNIL CHAUHAN		
19	88370216122019	SURENDER SINGH		
20	88370216122020	SURENDER SINGH DILTA		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: First

Subject : 17059 / DESIGN

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17060 / STILL LIFE

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370216122001	BEANT SINGH		
2	88370216122002	BELI RAM		
3	88370216122003	BINDU RAM		
4	88370216122004	DINESH CHAND		
5	88370216122005	GOBIND SINGH		
6	88370216122006	GURDEEP SINGH		
7	88370216122007	KAMAL DEEP		
8	88370216122008	MANOJ KUMAR		
9	88370216122009	MANOJ KUMAR		
10	88370216122010	MURARI LAL		
11	88370216122011	NEK CHAND		
12	88370216122012	PANKAJ		
13	88370216122013	PRADEEP KUMAR		
14	88370216122014	PRAYAG RAJ		
15	88370216122015	RAJAT KUMAR		
16	88370216122016	RESHMA SHARMA		
17	88370216122017	SANJAY KUMAR		
18	88370216122018	SUNIL CHAUHAN		
19	88370216122019	SURENDER SINGH		
20	88370216122020	SURENDER SINGH DILTA		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: First

Subject : 17060 / STILL LIFE

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17065 / CRAFT (P)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370216122001	BEANT SINGH		
2	88370216122002	BELI RAM		
3	88370216122003	BINDU RAM		
4	88370216122004	DINESH CHAND		
5	88370216122005	GOBIND SINGH		
6	88370216122006	GURDEEP SINGH		
7	88370216122007	KAMAL DEEP		
8	88370216122008	MANOJ KUMAR		
9	88370216122009	MANOJ KUMAR		
10	88370216122010	MURARI LAL		
11	88370216122011	NEK CHAND		
12	88370216122012	PANKAJ		
13	88370216122013	PRADEEP KUMAR		
14	88370216122014	PRAYAG RAJ		
15	88370216122015	RAJAT KUMAR		
16	88370216122016	RESHMA SHARMA		
17	88370216122017	SANJAY KUMAR		
18	88370216122018	SUNIL CHAUHAN		
19	88370216122019	SURENDER SINGH		
20	88370216122020	SURENDER SINGH DILTA		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: First

Subject : 17065 / CRAFT (P)

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17070 / PRINCIPLES OF EDUCATION

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370216122001	BEANT SINGH		
2	88370216122002	BELI RAM		
3	88370216122003	BINDU RAM		
4	88370216122004	DINESH CHAND		
5	88370216122005	GOBIND SINGH		
6	88370216122006	GURDEEP SINGH		
7	88370216122007	KAMAL DEEP		
8	88370216122008	MANOJ KUMAR		
9	88370216122009	MANOJ KUMAR		
10	88370216122010	MURARI LAL		
11	88370216122011	NEK CHAND		
12	88370216122012	PANKAJ		
13	88370216122013	PRADEEP KUMAR		
14	88370216122014	PRAYAG RAJ		
15	88370216122015	RAJAT KUMAR		
16	88370216122016	RESHMA SHARMA		
17	88370216122017	SANJAY KUMAR		
18	88370216122018	SUNIL CHAUHAN		
19	88370216122019	SURENDER SINGH		
20	88370216122020	SURENDER SINGH DILTA		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17070 / PRINCIPLES OF EDUCATION

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17071 / HISTORY & APPRECIATION OF ART

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370216122001	BEANT SINGH		
2	88370216122002	BELI RAM		
3	88370216122003	BINDU RAM		
4	88370216122004	DINESH CHAND		
5	88370216122005	GOBIND SINGH		
6	88370216122006	GURDEEP SINGH		
7	88370216122007	KAMAL DEEP		
8	88370216122008	MANOJ KUMAR		
9	88370216122009	MANOJ KUMAR		
10	88370216122010	MURARI LAL		
11	88370216122011	NEK CHAND		
12	88370216122012	PANKAJ		
13	88370216122013	PRADEEP KUMAR		
14	88370216122014	PRAYAG RAJ		
15	88370216122015	RAJAT KUMAR		
16	88370216122016	RESHMA SHARMA		
17	88370216122017	SANJAY KUMAR		
18	88370216122018	SUNIL CHAUHAN		
19	88370216122019	SURENDER SINGH		
20	88370216122020	SURENDER SINGH DILTA		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17071 / HISTORY & APPRECIATION OF ART

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17072 / COMP. AWARENESS & GRAPHICS (T)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370216122001	BEANT SINGH		
2	88370216122002	BELI RAM		
3	88370216122003	BINDU RAM		
4	88370216122004	DINESH CHAND		
5	88370216122005	GOBIND SINGH		
6	88370216122006	GURDEEP SINGH		
7	88370216122007	KAMAL DEEP		
8	88370216122008	MANOJ KUMAR		
9	88370216122009	MANOJ KUMAR		
10	88370216122010	MURARI LAL		
11	88370216122011	NEK CHAND		
12	88370216122012	PANKAJ		
13	88370216122013	PRADEEP KUMAR		
14	88370216122014	PRAYAG RAJ		
15	88370216122015	RAJAT KUMAR		
16	88370216122016	RESHMA SHARMA		
17	88370216122017	SANJAY KUMAR		
18	88370216122018	SUNIL CHAUHAN		
19	88370216122019	SURENDER SINGH		
20	88370216122020	SURENDER SINGH DILTA		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: First

Subject : 17072 / COMP. AWARENESS & GRAPHICS (T)

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17073 / GEOMETRICAL DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370216122001	BEANT SINGH		
2	88370216122002	BELI RAM		
3	88370216122003	BINDU RAM		
4	88370216122004	DINESH CHAND		
5	88370216122005	GOBIND SINGH		
6	88370216122006	GURDEEP SINGH		
7	88370216122007	KAMAL DEEP		
8	88370216122008	MANOJ KUMAR		
9	88370216122009	MANOJ KUMAR		
10	88370216122010	MURARI LAL		
11	88370216122011	NEK CHAND		
12	88370216122012	PANKAJ		
13	88370216122013	PRADEEP KUMAR		
14	88370216122014	PRAYAG RAJ		
15	88370216122015	RAJAT KUMAR		
16	88370216122016	RESHMA SHARMA		
17	88370216122017	SANJAY KUMAR		
18	88370216122018	SUNIL CHAUHAN		
19	88370216122019	SURENDER SINGH		
20	88370216122020	SURENDER SINGH DILTA		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: First

Subject : 17073 / GEOMETRICAL DRAWING

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17082 / COMP. AWARENESS & GRAPHICS (P)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370216122001	BEANT SINGH		
2	88370216122002	BELI RAM		
3	88370216122003	BINDU RAM		
4	88370216122004	DINESH CHAND		
5	88370216122005	GOBIND SINGH		
6	88370216122006	GURDEEP SINGH		
7	88370216122007	KAMAL DEEP		
8	88370216122008	MANOJ KUMAR		
9	88370216122009	MANOJ KUMAR		
10	88370216122010	MURARI LAL		
11	88370216122011	NEK CHAND		
12	88370216122012	PANKAJ		
13	88370216122013	PRADEEP KUMAR		
14	88370216122014	PRAYAG RAJ		
15	88370216122015	RAJAT KUMAR		
16	88370216122016	RESHMA SHARMA		
17	88370216122017	SANJAY KUMAR		
18	88370216122018	SUNIL CHAUHAN		
19	88370216122019	SURENDER SINGH		
20	88370216122020	SURENDER SINGH DILTA		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: First

Subject : 17082 / COMP. AWARENESS & GRAPHICS (P)

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70071 / HISTORY & APPRECIATION OF ART

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370216120006	PARASJEET SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1215 / INDUSTRIAL TRAINING INSTITUTE, RAJPURA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70073 / SCALE & PERSPECTIVE DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370216120003	HARDEEP SINGH.		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 114 / PLUMBER

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88209117921003	ARSHDEEP SINGH		
2	88209117921007	DAVINDERPAL SINGH		
3	88209117921012	KARMJEET SINGH		
4	88209117921014	LAKHVINDER SINGH		
5	88209117921017	NEGENDER SINGH		
6	88209117921024	TEJINDER SINGH		
7	88209117922001	ANGREJ SINGH		
8	88209117922003	GURDEEP SINGH		
9	88209117922006	GURMEET SINGH		
10	88209117922008	GURPREET SINGH		
11	88209117922011	HARPREET KAUR		
12	88209117922014	MANDEEP SINGH		
13	88209117922016	NAVDEEP SINGH		
14	88209117922018	RAHUL		
15	88209117922019	RAHUL SINGH REHAL		
16	88209117922020	RAMANDEEP SINGH		
17	88209117922021	SANDEEP KAUR		
18	88209117922023	TARMESH SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 114 / PLUMBER

Class: First

Subject : 44431 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 114 / PLUMBER

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88209117922001	ANGREJ SINGH		
2	88209117922003	GURDEEP SINGH		
3	88209117922006	GURMEET SINGH		
4	88209117922008	GURPREET SINGH		
5	88209117922011	HARPREET KAUR		
6	88209117922014	MANDEEP SINGH		
7	88209117922016	NAVDEEP SINGH		
8	88209117922018	RAHUL		
9	88209117922019	RAHUL SINGH REHAL		
10	88209117922020	RAMANDEEP SINGH		
11	88209117922021	SANDEEP KAUR		
12	88209117922023	TARMESH SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 114 / PLUMBER

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 114 / PLUMBER

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88209117922001	ANGREJ SINGH		
2	88209117922003	GURDEEP SINGH		
3	88209117922006	GURMEET SINGH		
4	88209117922008	GURPREET SINGH		
5	88209117922011	HARPREET KAUR		
6	88209117922014	MANDEEP SINGH		
7	88209117922016	NAVDEEP SINGH		
8	88209117922018	RAHUL		
9	88209117922019	RAHUL SINGH REHAL		
10	88209117922020	RAMANDEEP SINGH		
11	88209117922021	SANDEEP KAUR		
12	88209117922023	TARMESH SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 114 / PLUMBER

Class: First

Subject : 44435 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 132 / ELECTRICIAN

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231217922025	ALI KHAN		
2	88231217922026	AMRITPAL SINGH		
3	88231217922028	BHALWINDER SINGH		
4	88231217922029	BUNTY SINGH		
5	88231217922030	GURSEWAK SINGH		
6	88231217922032	HARSHPREET SINGH		
7	88231217922033	HARWINDER SINGH		
8	88231217922035	JASHANDEEP SINGH		
9	88231217922037	LOVEPREET SHARMA		
10	88231217922038	PAWAN KUMAR		
11	88231217922039	PRABJOT SINGH		
12	88231217922040	RAJWINDER SINGH		
13	88231217922041	RAVI KUMAR		
14	88231217922042	RESHAM KUMAR		
15	88231217922043	SATNAM SINGH		
16	88231217922044	SUMIT KUMAR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 132 / ELECTRICIAN

Class: First

Subject : 44431 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 132 / ELECTRICIAN

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231217922025	ALI KHAN		
2	88231217922026	AMRITPAL SINGH		
3	88231217922028	BHALWINDER SINGH		
4	88231217922029	BUNTY SINGH		
5	88231217922030	GURSEWAK SINGH		
6	88231217922032	HARSHPREET SINGH		
7	88231217922033	HARWINDER SINGH		
8	88231217922035	JASHANDEEP SINGH		
9	88231217922037	LOVEPREET SHARMA		
10	88231217922038	PAWAN KUMAR		
11	88231217922039	PRABJOT SINGH		
12	88231217922040	RAJWINDER SINGH		
13	88231217922041	RAVI KUMAR		
14	88231217922042	RESHAM KUMAR		
15	88231217922043	SATNAM SINGH		
16	88231217922044	SUMIT KUMAR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 132 / ELECTRICIAN

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 132 / ELECTRICIAN

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231217922025	ALI KHAN		
2	88231217922026	AMRITPAL SINGH		
3	88231217922028	BHALWINDER SINGH		
4	88231217922029	BUNTY SINGH		
5	88231217922030	GURSEWAK SINGH		
6	88231217922032	HARSHPREET SINGH		
7	88231217922033	HARWINDER SINGH		
8	88231217922035	JASHANDEEP SINGH		
9	88231217922037	LOVEPREET SHARMA		
10	88231217922038	PAWAN KUMAR		
11	88231217922039	PRABJOT SINGH		
12	88231217922040	RAJWINDER SINGH		
13	88231217922041	RAVI KUMAR		
14	88231217922042	RESHAM KUMAR		
15	88231217922043	SATNAM SINGH		
16	88231217922044	SUMIT KUMAR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 132 / ELECTRICIAN

Class: First

Subject : 44435 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17511 / PRINCIPLE OF EDUCATION

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175115620008	PARAMJEET KAUR		
2	88175115622001	AMANPREET KAUR		
3	88175115622002	ANJU KAUR		
4	88175115622003	ARSHDEEP		
5	88175115622004	BALTEJ KAUR		
6	88175115622005	BEANT KAUR		
7	88175115622006	DIMPLE KAUR		
8	88175115622007	HARPREET KAUR		
9	88175115622008	JASPREET KAUR		
10	88175115622009	JYOTI		
11	88175115622010	KULWINDER KAUR		
12	88175115622011	PARVEEN KAUR		
13	88175115622012	RAMANDEEP KAUR		
14	88175115622013	RAVINDER KAUR		
15	88175115622014	SANDEEP KAUR		
16	88175115622015	SIMARJEET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17511 / PRINCIPLE OF EDUCATION

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17512 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175115622001	AMANPREET KAUR		
2	88175115622002	ANJU KAUR		
3	88175115622003	ARSHDEEP		
4	88175115622004	BALTEJ KAUR		
5	88175115622005	BEANT KAUR		
6	88175115622006	DIMPLE KAUR		
7	88175115622007	HARPREET KAUR		
8	88175115622008	JASPREET KAUR		
9	88175115622009	JYOTI		
10	88175115622010	KULWINDER KAUR		
11	88175115622011	PARVEEN KAUR		
12	88175115622012	RAMANDEEP KAUR		
13	88175115622013	RAVINDER KAUR		
14	88175115622014	SANDEEP KAUR		
15	88175115622015	SIMARJEET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17512 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17513 / PRACTICE OF TEACHING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175115622001	AMANPREET KAUR		
2	88175115622002	ANJU KAUR		
3	88175115622003	ARSHDEEP		
4	88175115622004	BALTEJ KAUR		
5	88175115622005	BEANT KAUR		
6	88175115622006	DIMPLE KAUR		
7	88175115622007	HARPREET KAUR		
8	88175115622008	JASPREET KAUR		
9	88175115622009	JYOTI		
10	88175115622010	KULWINDER KAUR		
11	88175115622011	PARVEEN KAUR		
12	88175115622012	RAMANDEEP KAUR		
13	88175115622013	RAVINDER KAUR		
14	88175115622014	SANDEEP KAUR		
15	88175115622015	SIMARJEET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17513 / PRACTICE OF TEACHING

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17525 / PRACTICAL IV-A (MEN GARMENTS)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175115622001	AMANPREET KAUR		
2	88175115622002	ANJU KAUR		
3	88175115622003	ARSHDEEP		
4	88175115622004	BALTEJ KAUR		
5	88175115622005	BEANT KAUR		
6	88175115622006	DIMPLE KAUR		
7	88175115622007	HARPREET KAUR		
8	88175115622008	JASPREET KAUR		
9	88175115622009	JYOTI		
10	88175115622010	KULWINDER KAUR		
11	88175115622011	PARVEEN KAUR		
12	88175115622012	RAMANDEEP KAUR		
13	88175115622013	RAVINDER KAUR		
14	88175115622014	SANDEEP KAUR		
15	88175115622015	SIMARJEET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17525 / PRACTICAL IV-A (MEN GARMENTS)

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17526 / PRACTICAL IV-B (WOMEN GARMENTS)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175115622001	AMANPREET KAUR		
2	88175115622002	ANJU KAUR		
3	88175115622003	ARSHDEEP		
4	88175115622004	BALTEJ KAUR		
5	88175115622005	BEANT KAUR		
6	88175115622006	DIMPLE KAUR		
7	88175115622007	HARPREET KAUR		
8	88175115622008	JASPREET KAUR		
9	88175115622009	JYOTI		
10	88175115622010	KULWINDER KAUR		
11	88175115622011	PARVEEN KAUR		
12	88175115622012	RAMANDEEP KAUR		
13	88175115622013	RAVINDER KAUR		
14	88175115622014	SANDEEP KAUR		
15	88175115622015	SIMARJEET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17526 / PRACTICAL IV-B (WOMEN GARMENTS)

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17527 / PRACTICAL IV-C (CHILD. GARMENTS)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175115622001	AMANPREET KAUR		
2	88175115622002	ANJU KAUR		
3	88175115622003	ARSHDEEP		
4	88175115622004	BALTEJ KAUR		
5	88175115622005	BEANT KAUR		
6	88175115622006	DIMPLE KAUR		
7	88175115622007	HARPREET KAUR		
8	88175115622008	JASPREET KAUR		
9	88175115622009	JYOTI		
10	88175115622010	KULWINDER KAUR		
11	88175115622011	PARVEEN KAUR		
12	88175115622012	RAMANDEEP KAUR		
13	88175115622013	RAVINDER KAUR		
14	88175115622014	SANDEEP KAUR		
15	88175115622015	SIMARJEET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17527 / PRACTICAL IV-C (CHILD. GARMENTS)

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17528 / SCHEME WORK

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175115622001	AMANPREET KAUR		
2	88175115622002	ANJU KAUR		
3	88175115622003	ARSHDEEP		
4	88175115622004	BALTEJ KAUR		
5	88175115622005	BEANT KAUR		
6	88175115622006	DIMPLE KAUR		
7	88175115622007	HARPREET KAUR		
8	88175115622008	JASPREET KAUR		
9	88175115622009	JYOTI		
10	88175115622010	KULWINDER KAUR		
11	88175115622011	PARVEEN KAUR		
12	88175115622012	RAMANDEEP KAUR		
13	88175115622013	RAVINDER KAUR		
14	88175115622014	SANDEEP KAUR		
15	88175115622015	SIMARJEET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17528 / SCHEME WORK

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88242110721003	AMANDEEP KAUR		
2	88242110722001	AKWINDER KAUR		
3	88242110722002	AMANDEEP KAUR		
4	88242110722003	AMANDEEP KAUR		
5	88242110722004	ANNU DEVI		
6	88242110722005	BEANT KAUR		
7	88242110722007	BHUPINDER KAUR		
8	88242110722008	CHARAJDEEP KAUR		
9	88242110722009	DHARAMPREET KAUR		
10	88242110722010	DHARMINDER KAUR		
11	88242110722012	HARJINDER KAUR		
12	88242110722013	JASHANPREET KAUR		
13	88242110722014	JASMEEN		
14	88242110722015	JASPREET KAUR		
15	88242110722016	JOTI RANI		
16	88242110722017	KAJAL DEVI		
17	88242110722018	KAMALPREET KAUR		
18	88242110722019	KHUSHPREET		
19	88242110722020	KHUSHPREET KAUR		
20	88242110722021	KOMALJEET KAUR		
21	88242110722022	KULVIR RANI		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88242110722023	LAKHWINDER KAUR		
23	88242110722024	MALKEET KAUR		
24	88242110722025	MANDEEP KAUR		
25	88242110722026	NANDINI		
26	88242110722027	NEETA DEVI		
27	88242110722028	PARDEEP KAUR		
28	88242110722029	POOJA RANI		
29	88242110722030	RAJANDEEP KAUR		
30	88242110722032	RAJJI RANI		
31	88242110722033	RAM PIARI		
32	88242110722034	RAMANDEEP KAUR		
33	88242110722036	REENA KAUR		
34	88242110722037	REETU		
35	88242110722038	RIMPY RANI		
36	88242110722039	RITU DEVI		
37	88242110722040	RUPINDER KAUR		
38	88242110722041	SANDEEP KAUR		
39	88242110722043	SANDEEP KAUR		
40	88242110722045	SAPNA DEVI		
41	88242110722046	SARBJEET KAUR		
42	88242110722047	SIMRANJIT KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
43	88242110722048	VIRPAL KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88242110721003	AMANDEEP KAUR		
2	88242110722001	AKWINDER KAUR		
3	88242110722002	AMANDEEP KAUR		
4	88242110722003	AMANDEEP KAUR		
5	88242110722004	ANNU DEVI		
6	88242110722005	BEANT KAUR		
7	88242110722007	BHUPINDER KAUR		
8	88242110722008	CHARAJDEEP KAUR		
9	88242110722009	DHARAMPREET KAUR		
10	88242110722010	DHARMINDER KAUR		
11	88242110722012	HARJINDER KAUR		
12	88242110722013	JASHANPREET KAUR		
13	88242110722014	JASMEEN		
14	88242110722015	JASPREET KAUR		
15	88242110722016	JOTI RANI		
16	88242110722017	KAJAL DEVI		
17	88242110722018	KAMALPREET KAUR		
18	88242110722019	KHUSHPREET		
19	88242110722020	KHUSHPREET KAUR		
20	88242110722021	KOMALJEET KAUR		
21	88242110722022	KULVIR RANI		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88242110722023	LAKHWINDER KAUR		
23	88242110722024	MALKEET KAUR		
24	88242110722025	MANDEEP KAUR		
25	88242110722026	NANDINI		
26	88242110722027	NEETA DEVI		
27	88242110722028	PARDEEP KAUR		
28	88242110722029	POOJA RANI		
29	88242110722030	RAJANDEEP KAUR		
30	88242110722032	RAJJI RANI		
31	88242110722033	RAM PIARI		
32	88242110722034	RAMANDEEP KAUR		
33	88242110722036	REENA KAUR		
34	88242110722037	REETU		
35	88242110722038	RIMPY RANI		
36	88242110722039	RITU DEVI		
37	88242110722040	RUPINDER KAUR		
38	88242110722041	SANDEEP KAUR		
39	88242110722043	SANDEEP KAUR		
40	88242110722045	SAPNA DEVI		
41	88242110722046	SARBJEET KAUR		
42	88242110722047	SIMRANJIT KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
43	88242110722048	VIRPAL KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88242110722001	AKWINDER KAUR		
2	88242110722002	AMANDEEP KAUR		
3	88242110722003	AMANDEEP KAUR		
4	88242110722004	ANNU DEVI		
5	88242110722005	BEANT KAUR		
6	88242110722007	BHUPINDER KAUR		
7	88242110722008	CHARAJDEEP KAUR		
8	88242110722009	DHARAMPREET KAUR		
9	88242110722010	DHARMINDER KAUR		
10	88242110722012	HARJINDER KAUR		
11	88242110722013	JASHANPREET KAUR		
12	88242110722014	JASMEEN		
13	88242110722015	JASPREET KAUR		
14	88242110722016	JOTI RANI		
15	88242110722017	KAJAL DEVI		
16	88242110722018	KAMALPREET KAUR		
17	88242110722019	KHUSHPREET		
18	88242110722020	KHUSHPREET KAUR		
19	88242110722021	KOMALJEET KAUR		
20	88242110722022	KULVIR RANI		
21	88242110722023	LAKHWINDER KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88242110722024	MALKEET KAUR		
23	88242110722025	MANDEEP KAUR		
24	88242110722026	NANDINI		
25	88242110722027	NEETA DEVI		
26	88242110722028	PARDEEP KAUR		
27	88242110722029	POOJA RANI		
28	88242110722030	RAJANDEEP KAUR		
29	88242110722032	RAJJI RANI		
30	88242110722033	RAM PIARI		
31	88242110722034	RAMANDEEP KAUR		
32	88242110722036	REENA KAUR		
33	88242110722037	REETU		
34	88242110722038	RIMPY RANI		
35	88242110722039	RITU DEVI		
36	88242110722040	RUPINDER KAUR		
37	88242110722041	SANDEEP KAUR		
38	88242110722043	SANDEEP KAUR		
39	88242110722045	SAPNA DEVI		
40	88242110722046	SARBJEET KAUR		
41	88242110722047	SIMRANJIT KAUR		
42	88242110722048	VIRPAL KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 222 / COMP. OP. PROGRAM. ASSISTANT Class: First

Subject : 44435 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 370 / ART & CRAFTS

Class: Second

Subject : 70073 / SCALE & PERSPECTIVE DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370115619023	MEENA DEVI		
2	88370115619025	RICHA JAIN		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 651 / COSMETOLOGY

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88239110722050	AMANDEEP KAUR		
2	88239110722051	AMANJOT KAUR		
3	88239110722052	ANJALI		
4	88239110722055	GURPREET KAUR		
5	88239110722056	HARDEEP KAUR		
6	88239110722057	HARPREET KAUR		
7	88239110722058	HARPREET KAUR		
8	88239110722059	ISHU GARG		
9	88239110722060	KHUSHPREET KAUR		
10	88239110722061	KRISHNA DEVI		
11	88239110722062	KULWINDER KAUR		
12	88239110722066	MANPREET KAUR		
13	88239110722067	MANPREET KAUR		
14	88239110722068	RAJWINDER KAUR		
15	88239110722072	SUNITA RANI		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 651 / COSMETOLOGY

Class: First

Subject : 44431 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 651 / COSMETOLOGY

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88239110722050	AMANDEEP KAUR		
2	88239110722051	AMANJOT KAUR		
3	88239110722052	ANJALI		
4	88239110722055	GURPREET KAUR		
5	88239110722056	HARDEEP KAUR		
6	88239110722057	HARPREET KAUR		
7	88239110722058	HARPREET KAUR		
8	88239110722059	ISHU GARG		
9	88239110722060	KHUSHPREET KAUR		
10	88239110722061	KRISHNA DEVI		
11	88239110722062	KULWINDER KAUR		
12	88239110722066	MANPREET KAUR		
13	88239110722067	MANPREET KAUR		
14	88239110722068	RAJWINDER KAUR		
15	88239110722072	SUNITA RANI		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 651 / COSMETOLOGY

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 651 / COSMETOLOGY

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88239110722050	AMANDEEP KAUR		
2	88239110722051	AMANJOT KAUR		
3	88239110722052	ANJALI		
4	88239110722055	GURPREET KAUR		
5	88239110722056	HARDEEP KAUR		
6	88239110722057	HARPREET KAUR		
7	88239110722058	HARPREET KAUR		
8	88239110722059	ISHU GARG		
9	88239110722060	KHUSHPREET KAUR		
10	88239110722061	KRISHNA DEVI		
11	88239110722062	KULWINDER KAUR		
12	88239110722066	MANPREET KAUR		
13	88239110722067	MANPREET KAUR		
14	88239110722068	RAJWINDER KAUR		
15	88239110722072	SUNITA RANI		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 651 / COSMETOLOGY

Class: First

Subject : 44435 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 664 / PUNJABI STENOGRAPHY

Class: First

Subject : 17411 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88174116921019	KAMALPREET SINGH		
2	88174116921020	KARAMJIT SINGH		
3	88174116922001	AKWINDER KAUR		
4	88174116922003	AMANPREET KAUR		
5	88174116922008	GURBINDER SINGH		
6	88174116922011	GURVINDER KAUR		
7	88174116922012	GURVIR SINGH		
8	88174116922013	HARDEEP KHAN		
9	88174116922014	HARPREET KAUR		
10	88174116922016	JYOTI RANI		
11	88174116922017	KHUSHDEEP KAUR		
12	88174116922018	LAKHWINDER SINGH		
13	88174116922019	MANDEEP KAUR		
14	88174116922020	MANINDER SINGH		
15	88174116922022	MARIYA		
16	88174116922024	MOHIT GORSI		
17	88174116922025	MUNISH KUMAR		
18	88174116922026	NARINDER KHAN		
19	88174116922027	NAVJOT KAUR		
20	88174116922029	RAJVIR KAUR		
21	88174116922033	SHANKI GORSI		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 664 / PUNJABI STENOGRAPHY

Class: First

Subject : 17411 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88174116922034	SHARANJIT SINGH		
23	88174116922035	SITAL RAM		
24	88174116922036	SUKHMANPREET SINGH		
25	88174116922038	SUMAN RANI		
26	88174116922039	SUPREET SHARMA		
27	88174116922040	VEERU SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 664 / PUNJABI STENOGRAPHY

Class: First

Subject : 17414 / SOCIAL STUDIES

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88174116921001	AJAY KUMAR		
2	88174116921003	AMANJOT KAUR		
3	88174116921008	DAVINDER SINGH		
4	88174116921011	GURDAS SINGH		
5	88174116921012	GURPREET SINGH		
6	88174116921017	JEEVAN SINGH		
7	88174116921018	KAMALPREET KAUR		
8	88174116921019	KAMALPREET SINGH		
9	88174116921020	KARAMJIT SINGH		
10	88174116921023	LADDI RAM		
11	88174116921027	PUSHWINDER KAUR		
12	88174116921028	RAJA RAM		
13	88174116921029	RAJNI KAUR		
14	88174116921030	RAMANDEEP KAUR		
15	88174116921031	RIMPI DEVI		
16	88174116921032	RUHI BAGUM		
17	88174116921034	SANDEEP KAUR		
18	88174116921035	SUKHCHAIN SINGH		
19	88174116922001	AKWINDER KAUR		
20	88174116922003	AMANPREET KAUR		
21	88174116922008	GURBINDER SINGH		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 664 / PUNJABI STENOGRAPHY

Class: First

Subject : 17414 / SOCIAL STUDIES

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88174116922011	GURVINDER KAUR		
23	88174116922012	GURVIR SINGH		
24	88174116922013	HARDEEP KHAN		
25	88174116922014	HARPREET KAUR		
26	88174116922016	JYOTI RANI		
27	88174116922017	KHUSHDEEP KAUR		
28	88174116922018	LAKHWINDER SINGH		
29	88174116922019	MANDEEP KAUR		
30	88174116922020	MANINDER SINGH		
31	88174116922022	MARIYA		
32	88174116922024	MOHIT GORSI		
33	88174116922025	MUNISH KUMAR		
34	88174116922026	NARINDER KHAN		
35	88174116922027	NAVJOT KAUR		
36	88174116922029	RAJVIR KAUR		
37	88174116922033	SHANKI GORSI		
38	88174116922034	SHARANJIT SINGH		
39	88174116922035	SITAL RAM		
40	88174116922036	SUKHMANPREET SINGH		
41	88174116922038	SUMAN RANI		
42	88174116922039	SUPREET SHARMA		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 664 / PUNJABI STENOGRAPHY

Class: First

Subject : 17414 / SOCIAL STUDIES

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
43	88174116922040	VEERU SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 664 / PUNJABI STENOGRAPHY

Class: First

Subject : 17415 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88174116922001	AKWINDER KAUR		
2	88174116922003	AMANPREET KAUR		
3	88174116922008	GURBINDER SINGH		
4	88174116922011	GURVINDER KAUR		
5	88174116922012	GURVIR SINGH		
6	88174116922013	HARDEEP KHAN		
7	88174116922014	HARPREET KAUR		
8	88174116922016	JYOTI RANI		
9	88174116922017	KHUSHDEEP KAUR		
10	88174116922018	LAKHWINDER SINGH		
11	88174116922019	MANDEEP KAUR		
12	88174116922020	MANINDER SINGH		
13	88174116922022	MARIYA		
14	88174116922024	MOHIT GORSI		
15	88174116922025	MUNISH KUMAR		
16	88174116922026	NARINDER KHAN		
17	88174116922027	NAVJOT KAUR		
18	88174116922029	RAJVIR KAUR		
19	88174116922033	SHANKI GORSI		
20	88174116922034	SHARANJIT SINGH		
21	88174116922035	SITAL RAM		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 664 / PUNJABI STENOGRAPHY

Class: First

Subject : 17415 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88174116922036	SUKHMANPREET SINGH		
23	88174116922038	SUMAN RANI		
24	88174116922039	SUPREET SHARMA		
25	88174116922040	VEERU SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 664 / PUNJABI STENOGRAPHY

Class: First

Subject : 17416 / COGNATE

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88174116921020	KARAMJIT SINGH		
2	88174116922001	AKWINDER KAUR		
3	88174116922003	AMANPREET KAUR		
4	88174116922008	GURBINDER SINGH		
5	88174116922011	GURVINDER KAUR		
6	88174116922012	GURVIR SINGH		
7	88174116922013	HARDEEP KHAN		
8	88174116922014	HARPREET KAUR		
9	88174116922016	JYOTI RANI		
10	88174116922017	KHUSHDEEP KAUR		
11	88174116922018	LAKHWINDER SINGH		
12	88174116922019	MANDEEP KAUR		
13	88174116922020	MANINDER SINGH		
14	88174116922022	MARIYA		
15	88174116922024	MOHIT GORSI		
16	88174116922025	MUNISH KUMAR		
17	88174116922026	NARINDER KHAN		
18	88174116922027	NAVJOT KAUR		
19	88174116922029	RAJVIR KAUR		
20	88174116922033	SHANKI GORSI		
21	88174116922034	SHARANJIT SINGH		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 664 / PUNJABI STENOGRAPHY

Class: First

Subject : 17416 / COGNATE

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88174116922035	SITAL RAM		
23	88174116922036	SUKHMANPREET SINGH		
24	88174116922038	SUMAN RANI		
25	88174116922039	SUPREET SHARMA		
26	88174116922040	VEERU SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1288 / GOVT. INDUSTRIAL TRAINING INSTITUTE, SAMANA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: Second

Subject : 70073 / SCALE & PERSPECTIVE DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370215620016	DEEPALI JAIN		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR

Course : 132 / ELECTRICIAN

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231223321014	MANPREET SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44441 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231223321002	AMRITPAL SINGH		
2	88231223321004	BALWINDER SINGH		
3	88231223321005	GURDEEP SINGH		
4	88231223321006	GURPREET SINGH		
5	88231223321007	JARNAIL SINGH		
6	88231223321008	JASHANDEEP SINGH		
7	88231223321009	JASKARAN SINGH		
8	88231223321010	JASPREET SINGH		
9	88231223321011	JASWINDER SINGH		
10	88231223321012	KAMALJEET SINGH		
11	88231223321013	MANOJ KUMAR		
12	88231223321014	MANPREET SINGH		
13	88231223321015	PARMINDER SINGH		
14	88231223321016	PARNEET SINGH		
15	88231223321018	SACHIN SINGH		
16	88231223321019	SAHIL DADRIA		
17	88231223321020	SHIV SHARMA		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44441 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44444 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231223321002	AMRITPAL SINGH		
2	88231223321004	BALWINDER SINGH		
3	88231223321005	GURDEEP SINGH		
4	88231223321006	GURPREET SINGH		
5	88231223321007	JARNAIL SINGH		
6	88231223321008	JASHANDEEP SINGH		
7	88231223321009	JASKARAN SINGH		
8	88231223321010	JASPREET SINGH		
9	88231223321011	JASWINDER SINGH		
10	88231223321012	KAMALJEET SINGH		
11	88231223321013	MANOJ KUMAR		
12	88231223321014	MANPREET SINGH		
13	88231223321015	PARMINDER SINGH		
14	88231223321016	PARNEET SINGH		
15	88231223321018	SACHIN SINGH		
16	88231223321019	SAHIL DADRIA		
17	88231223321020	SHIV SHARMA		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44444 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44445 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231223321002	AMRITPAL SINGH		
2	88231223321004	BALWINDER SINGH		
3	88231223321005	GURDEEP SINGH		
4	88231223321006	GURPREET SINGH		
5	88231223321007	JARNAIL SINGH		
6	88231223321008	JASHANDEEP SINGH		
7	88231223321009	JASKARAN SINGH		
8	88231223321010	JASPREET SINGH		
9	88231223321011	JASWINDER SINGH		
10	88231223321012	KAMALJEET SINGH		
11	88231223321013	MANOJ KUMAR		
12	88231223321014	MANPREET SINGH		
13	88231223321015	PARMINDER SINGH		
14	88231223321016	PARNEET SINGH		
15	88231223321018	SACHIN SINGH		
16	88231223321019	SAHIL DADRIA		
17	88231223321020	SHIV SHARMA		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44445 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR

Course : 268 / WELDER (GMAW AND GTAW) Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88268123522001	GURPREET SINGH		
2	88268123522002	MANDEEP SINGH		
3	88268123522003	SATNAM SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR

Course : 268 / WELDER (GMAW AND GTAW) Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88268123522001	GURPREET SINGH		
2	88268123522002	MANDEEP SINGH		
3	88268123522003	SATNAM SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR

Course : 268 / WELDER (GMAW AND GTAW) Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88268123522001	GURPREET SINGH		
2	88268123522002	MANDEEP SINGH		
3	88268123522003	SATNAM SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR

Course : 652 / FASHION DESIGN TECHNOLOGY

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88246123322001	AKRITI SAINI		
2	88246123322002	GAGANPREET KAUR		
3	88246123322005	HARJEET KAUR		
4	88246123322006	HARPREET KAUR		
5	88246123322009	JASPREET KAUR		
6	88246123322010	MANPREET KAUR		
7	88246123322011	MANPREET KAUR		
8	88246123322012	NAMARTA DHIMAN		
9	88246123322013	NAVNEET KAUR		
10	88246123322014	NITASHA		
11	88246123322015	PARWINDER KAUR		
12	88246123322016	RAJNI		
13	88246123322017	ROMANPREET KAUR		
14	88246123322018	SANDEEP KAUR		
15	88246123322020	TANIA MATHAN		
16	88246126022003	GURDEEP KAUR		
17	88246126022005	JASKIRANDEEP KAUR		
18	88246126022006	JASVIR KAUR		
19	88246126022008	MANJOT KAUR		
20	88246126022013	PREETI		
21	88246126022014	RAJINDER KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR

Course : 652 / FASHION DESIGN TECHNOLOGY

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88246126022015	RAJWINDER KAUR		
23	88246126022016	SARABJEET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR

Course : 652 / FASHION DESIGN TECHNOLOGY

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88246123322001	AKRITI SAINI		
2	88246123322002	GAGANPREET KAUR		
3	88246123322005	HARJEET KAUR		
4	88246123322006	HARPREET KAUR		
5	88246123322009	JASPREET KAUR		
6	88246123322010	MANPREET KAUR		
7	88246123322011	MANPREET KAUR		
8	88246123322012	NAMARTA DHIMAN		
9	88246123322013	NAVNEET KAUR		
10	88246123322014	NITASHA		
11	88246123322015	PARWINDER KAUR		
12	88246123322016	RAJNI		
13	88246123322017	ROMANPREET KAUR		
14	88246123322018	SANDEEP KAUR		
15	88246123322020	TANIA MATHAN		
16	88246126022003	GURDEEP KAUR		
17	88246126022005	JASKIRANDEEP KAUR		
18	88246126022006	JASVIR KAUR		
19	88246126022008	MANJOT KAUR		
20	88246126022013	PREETI		
21	88246126022014	RAJINDER KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR

Course : 652 / FASHION DESIGN TECHNOLOGY

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88246126022015	RAJWINDER KAUR		
23	88246126022016	SARABJEET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR

Course : 652 / FASHION DESIGN TECHNOLOGY

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88246123322001	AKRITI SAINI		
2	88246123322002	GAGANPREET KAUR		
3	88246123322005	HARJEET KAUR		
4	88246123322006	HARPREET KAUR		
5	88246123322009	JASPREET KAUR		
6	88246123322010	MANPREET KAUR		
7	88246123322011	MANPREET KAUR		
8	88246123322012	NAMARTA DHIMAN		
9	88246123322013	NAVNEET KAUR		
10	88246123322014	NITASHA		
11	88246123322015	PARWINDER KAUR		
12	88246123322016	RAJNI		
13	88246123322017	ROMANPREET KAUR		
14	88246123322018	SANDEEP KAUR		
15	88246123322020	TANIA MATHAN		
16	88246126022003	GURDEEP KAUR		
17	88246126022005	JASKIRANDEEP KAUR		
18	88246126022006	JASVIR KAUR		
19	88246126022008	MANJOT KAUR		
20	88246126022013	PREETI		
21	88246126022014	RAJINDER KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR

Course : 652 / FASHION DESIGN TECHNOLOGY

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88246126022015	RAJWINDER KAUR		
23	88246126022016	SARABJEET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR

Course : 658 / SEWING TECHNOLOGY

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88247122422004	KOMAL		
2	88247122422005	KUMKUM		
3	88247122422007	LOVELEEN KUMARI		
4	88247122422008	SUNITA		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR

Course : 658 / SEWING TECHNOLOGY

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88247122422004	KOMAL		
2	88247122422005	KUMKUM		
3	88247122422007	LOVELEEN KUMARI		
4	88247122422008	SUNITA		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR

Course : 658 / SEWING TECHNOLOGY

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88247122422004	KOMAL		
2	88247122422005	KUMKUM		
3	88247122422007	LOVELEEN KUMARI		
4	88247122422008	SUNITA		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR

Course : 660 / WELDER

Class: First

Subject : 44413 / ENGINEERING DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88212123320038	NARESH KUMAR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR

Course : 660 / WELDER

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88212123322021	AMANDEEP SHARMA		
2	88212123322022	ARUN KUMAR		
3	88212123322023	GURWINDER SINGH		
4	88212123322025	HARMAN SINGH		
5	88212123322026	HARSH KUMAR		
6	88212123322028	JASVIR SINGH		
7	88212123322029	KESHAV		
8	88212123322030	SIMERJIT SINGH		
9	88212123322031	SUKHWINDER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR

Course : 660 / WELDER

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88212123322021	AMANDEEP SHARMA		
2	88212123322022	ARUN KUMAR		
3	88212123322023	GURWINDER SINGH		
4	88212123322025	HARMAN SINGH		
5	88212123322026	HARSH KUMAR		
6	88212123322028	JASVIR SINGH		
7	88212123322029	KESHAV		
8	88212123322030	SIMERJIT SINGH		
9	88212123322031	SUKHWINDER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR

Course : 660 / WELDER

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88212123322021	AMANDEEP SHARMA		
2	88212123322022	ARUN KUMAR		
3	88212123322023	GURWINDER SINGH		
4	88212123322025	HARMAN SINGH		
5	88212123322026	HARSH KUMAR		
6	88212123322028	JASVIR SINGH		
7	88212123322029	KESHAV		
8	88212123322030	SIMERJIT SINGH		
9	88212123322031	SUKHWINDER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR

Course : 661 / COMPUTER HARDWARE AND NETWORK MAINTENANCE Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88264123522006	AMARJIT SINGH		
2	88264123522007	AMRITPAL SINGH		
3	88264123522008	AMRITPAL SINGH		
4	88264123522009	CHANNU DEVI		
5	88264123522010	DALJIT SINGH		
6	88264123522011	GAGANDEEP SINGH		
7	88264123522012	GAGANDEEP SINGH		
8	88264123522013	GURMEET SINGH		
9	88264123522014	HARNOOR SINGH RANA		
10	88264123522015	JASHANPREET SINGH		
11	88264123522016	JASMEEN KAUR		
12	88264123522017	KARAN KUMAR		
13	88264123522018	KHUSHPREET SINGH		
14	88264123522019	KOMALPREET KAUR		
15	88264123522020	MANKIRAT SINGH SAINI		
16	88264123522021	RADHIKA SHARMA		
17	88264123522022	RAJINDER KAUR		
18	88264123522024	SHAWET SAINI		
19	88264123522027	VANDANA		
20	88264123522028	VISHAKHA CHOUDHARY		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR

Course : 661 / COMPUTER HARDWARE AND NETWORK MAINTENANCE Class: First

Subject : 44431 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR

Course : 661 / COMPUTER HARDWARE AND NETWORK MAINTENANCE Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88264123522006	AMARJIT SINGH		
2	88264123522007	AMRITPAL SINGH		
3	88264123522008	AMRITPAL SINGH		
4	88264123522009	CHANNU DEVI		
5	88264123522010	DALJIT SINGH		
6	88264123522011	GAGANDEEP SINGH		
7	88264123522012	GAGANDEEP SINGH		
8	88264123522013	GURMEET SINGH		
9	88264123522014	HARNOOR SINGH RANA		
10	88264123522015	JASHANPREET SINGH		
11	88264123522016	JASMEEN KAUR		
12	88264123522017	KARAN KUMAR		
13	88264123522018	KHUSHPREET SINGH		
14	88264123522019	KOMALPREET KAUR		
15	88264123522020	MANKIRAT SINGH SAINI		
16	88264123522021	RADHIKA SHARMA		
17	88264123522022	RAJINDER KAUR		
18	88264123522024	SHAWET SAINI		
19	88264123522027	VANDANA		
20	88264123522028	VISHAKHA CHOUDHARY		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR

Course : 661 / COMPUTER HARDWARE AND NETWORK MAINTENANCE Class: First

Subject : 44434 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR

Course : 661 / COMPUTER HARDWARE AND NETWORK MAINTENANCE Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88264123522006	AMARJIT SINGH		
2	88264123522007	AMRITPAL SINGH		
3	88264123522008	AMRITPAL SINGH		
4	88264123522009	CHANNU DEVI		
5	88264123522010	DALJIT SINGH		
6	88264123522011	GAGANDEEP SINGH		
7	88264123522012	GAGANDEEP SINGH		
8	88264123522013	GURMEET SINGH		
9	88264123522014	HARNOOR SINGH RANA		
10	88264123522015	JASHANPREET SINGH		
11	88264123522016	JASMEEN KAUR		
12	88264123522017	KARAN KUMAR		
13	88264123522018	KHUSHPREET SINGH		
14	88264123522019	KOMALPREET KAUR		
15	88264123522020	MANKIRAT SINGH SAINI		
16	88264123522021	RADHIKA SHARMA		
17	88264123522022	RAJINDER KAUR		
18	88264123522024	SHAWET SAINI		
19	88264123522027	VANDANA		
20	88264123522028	VISHAKHA CHOUDHARY		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR

Course : 661 / COMPUTER HARDWARE AND NETWORK MAINTENANCE Class: First

Subject : 44435 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR

Course : 667 / FOOD AND BEVERAGES SERVICE ASSISTANT

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88252122422009	ANKIT KASANA		
2	88252122422012	GURJEET SINGH		
3	88252122422015	HARPREET KAUR		
4	88252122422016	JANAKPREET SINGH		
5	88252122422020	MANRAJPREET SINGH		
6	88252122422021	MUKUL ARORA		
7	88252122422023	PAWANDEEP SINGH		
8	88252122422024	SAHIL		
9	88252122422027	SIMRANDEEP KAUR		
10	88252122422028	SUKHNANDAN SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR

Course : 667 / FOOD AND BEVERAGES SERVICE ASSISTANT Class: First

Subject : 44431 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR

Course : 667 / FOOD AND BEVERAGES SERVICE ASSISTANT

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88252122422009	ANKIT KASANA		
2	88252122422012	GURJEET SINGH		
3	88252122422015	HARPREET KAUR		
4	88252122422016	JANAKPREET SINGH		
5	88252122422020	MANRAJPREET SINGH		
6	88252122422021	MUKUL ARORA		
7	88252122422023	PAWANDEEP SINGH		
8	88252122422024	SAHIL		
9	88252122422027	SIMRANDEEP KAUR		
10	88252122422028	SUKHNANDAN SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR

Course : 667 / FOOD AND BEVERAGES SERVICE ASSISTANT Class: First

Subject : 44434 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR

Course : 667 / FOOD AND BEVERAGES SERVICE ASSISTANT

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88252122422009	ANKIT KASANA		
2	88252122422012	GURJEET SINGH		
3	88252122422015	HARPREET KAUR		
4	88252122422016	JANAKPREET SINGH		
5	88252122422020	MANRAJPREET SINGH		
6	88252122422021	MUKUL ARORA		
7	88252122422023	PAWANDEEP SINGH		
8	88252122422024	SAHIL		
9	88252122422027	SIMRANDEEP KAUR		
10	88252122422028	SUKHNANDAN SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR

Course : 667 / FOOD AND BEVERAGES SERVICE ASSISTANT Class: First

Subject : 44435 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 132 / ELECTRICIAN

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231221622001	AMNINDER SINGH		
2	88231221622002	ARSHDEEP SINGH		
3	88231221622003	AZZIZ KHAN		
4	88231221622004	BAZZIZ KHAN		
5	88231221622005	GAGANDEEP SINGH		
6	88231221622006	HARMANPREET SINGH		
7	88231221622007	HARPREET SINGH		
8	88231221622008	JASPREET SINGH		
9	88231221622009	KARANVEER SINGH		
10	88231221622010	KASHDEEP SINGH		
11	88231221622012	LOVEPREET SINGH		
12	88231221622013	MANINDER SINGH		
13	88231221622014	MOHIT		
14	88231221622015	PARDEEP SINGH		
15	88231221622016	PRABHJOT SINGH		
16	88231221622017	RAHUL KUMAR		
17	88231221622018	RAMANDEEP SINGH		
18	88231221622020	VARINDER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 132 / ELECTRICIAN

Class: First

Subject : 44431 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 132 / ELECTRICIAN

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231221622001	AMNINDER SINGH		
2	88231221622002	ARSHDEEP SINGH		
3	88231221622003	AZZIZ KHAN		
4	88231221622004	BAZZIZ KHAN		
5	88231221622005	GAGANDEEP SINGH		
6	88231221622006	HARMANPREET SINGH		
7	88231221622007	HARPREET SINGH		
8	88231221622008	JASPREET SINGH		
9	88231221622009	KARANVEER SINGH		
10	88231221622010	KASHDEEP SINGH		
11	88231221622012	LOVEPREET SINGH		
12	88231221622013	MANINDER SINGH		
13	88231221622014	MOHIT		
14	88231221622015	PARDEEP SINGH		
15	88231221622016	PRABHJOT SINGH		
16	88231221622017	RAHUL KUMAR		
17	88231221622018	RAMANDEEP SINGH		
18	88231221622020	VARINDER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 132 / ELECTRICIAN

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 132 / ELECTRICIAN

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231221622001	AMNINDER SINGH		
2	88231221622002	ARSHDEEP SINGH		
3	88231221622003	AZZIZ KHAN		
4	88231221622004	BAZZIZ KHAN		
5	88231221622005	GAGANDEEP SINGH		
6	88231221622006	HARMANPREET SINGH		
7	88231221622007	HARPREET SINGH		
8	88231221622008	JASPREET SINGH		
9	88231221622009	KARANVEER SINGH		
10	88231221622010	KASHDEEP SINGH		
11	88231221622012	LOVEPREET SINGH		
12	88231221622013	MANINDER SINGH		
13	88231221622014	MOHIT		
14	88231221622015	PARDEEP SINGH		
15	88231221622016	PRABHJOT SINGH		
16	88231221622017	RAHUL KUMAR		
17	88231221622018	RAMANDEEP SINGH		
18	88231221622020	VARINDER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 132 / ELECTRICIAN

Class: First

Subject : 44435 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 142 / DRAUGHTSMAN (MECHANICAL) Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88224221122001	AMANDEEP KAUR		
2	88224221122002	ANISHA RANI		
3	88224221122004	JASHANPREET KAUR		
4	88224221122006	KHUSHI		
5	88224221122008	MANSI		
6	88224221122009	MANVIR KAUR		
7	88224221122010	PRIYANKA		
8	88224221122011	SANJNA RANI		
9	88224221122012	SHIFFALI		
10	88224221122013	SIMRANJEET KAUR		
11	88224221122014	SIMRANJEET KAUR		
12	88224221122017	VERSHA		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 142 / DRAUGHTSMAN (MECHANICAL) Class: First

Subject : 44431 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 142 / DRAUGHTSMAN (MECHANICAL) Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88224221122001	AMANDEEP KAUR		
2	88224221122002	ANISHA RANI		
3	88224221122004	JASHANPREET KAUR		
4	88224221122006	KHUSHI		
5	88224221122008	MANSI		
6	88224221122009	MANVIR KAUR		
7	88224221122010	PRIYANKA		
8	88224221122011	SANJNA RANI		
9	88224221122012	SHIFFALI		
10	88224221122013	SIMRANJEET KAUR		
11	88224221122014	SIMRANJEET KAUR		
12	88224221122017	VERSHA		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 142 / DRAUGHTSMAN (MECHANICAL) Class: First

Subject : 44434 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 142 / DRAUGHTSMAN (MECHANICAL) Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88224221122001	AMANDEEP KAUR		
2	88224221122002	ANISHA RANI		
3	88224221122004	JASHANPREET KAUR		
4	88224221122006	KHUSHI		
5	88224221122008	MANSI		
6	88224221122009	MANVIR KAUR		
7	88224221122010	PRIYANKA		
8	88224221122011	SANJNA RANI		
9	88224221122012	SHIFFALI		
10	88224221122013	SIMRANJEET KAUR		
11	88224221122014	SIMRANJEET KAUR		
12	88224221122017	VERSHA		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 142 / DRAUGHTSMAN (MECHANICAL) Class: First

Subject : 44435 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 142 / DRAUGHTSMAN (MECHANICAL) Class: Second

Subject : 44441 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88224221121001	ASHWANI SHELLY		
2	88224221121002	GURINDER KAUR		
3	88224221121004	HARPREET KAUR		
4	88224221121005	HARVINDER KAUR		
5	88224221121006	HUSANPREET KAUR		
6	88224221121007	JASHANPREET KAUR		
7	88224221121009	KAMALPREET KAUR		
8	88224221121011	MUSKAN		
9	88224221121017	SANJANA		
10	88224221121018	SAPNA		
11	88224221121020	SUKHPREET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 142 / DRAUGHTSMAN (MECHANICAL) Class: Second

Subject : 44441 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 142 / DRAUGHTSMAN (MECHANICAL) Class: Second

Subject : 44444 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88224221121001	ASHWANI SHELLY		
2	88224221121002	GURINDER KAUR		
3	88224221121004	HARPREET KAUR		
4	88224221121005	HARVINDER KAUR		
5	88224221121006	HUSANPREET KAUR		
6	88224221121007	JASHANPREET KAUR		
7	88224221121009	KAMALPREET KAUR		
8	88224221121011	MUSKAN		
9	88224221121017	SANJANA		
10	88224221121018	SAPNA		
11	88224221121020	SUKHPREET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 142 / DRAUGHTSMAN (MECHANICAL) Class: Second

Subject : 44444 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 142 / DRAUGHTSMAN (MECHANICAL) Class: Second

Subject : 44445 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88224221121001	ASHWANI SHELLY		
2	88224221121002	GURINDER KAUR		
3	88224221121004	HARPREET KAUR		
4	88224221121005	HARVINDER KAUR		
5	88224221121006	HUSANPREET KAUR		
6	88224221121007	JASHANPREET KAUR		
7	88224221121009	KAMALPREET KAUR		
8	88224221121011	MUSKAN		
9	88224221121017	SANJANA		
10	88224221121018	SAPNA		
11	88224221121020	SUKHPREET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 142 / DRAUGHTSMAN (MECHANICAL) Class: Second

Subject : 44445 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 143 / DRAUGHTSMAN (CIVIL) Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88217221621023	TARANJOT SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 143 / DRAUGHTSMAN (CIVIL) Class: Second

Subject : 44441 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88217221621002	DEV		
2	88217221621022	TANIA		
3	88217221621023	TARANJOT SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 143 / DRAUGHTSMAN (CIVIL) Class: Second

Subject : 44444 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88217221621002	DEV		
2	88217221621022	TANIA		
3	88217221621023	TARANJOT SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 143 / DRAUGHTSMAN (CIVIL) Class: Second

Subject : 44445 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88217221621002	DEV		
2	88217221621022	TANIA		
3	88217221621023	TARANJOT SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17511 / PRINCIPLE OF EDUCATION

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175121521006	AMANPREET KAUR		
2	88175121521018	RAJVIR KAUR		
3	88175121521020	RAMANDEEP KAUR		
4	88175121522001	AMANDEEP KAUR		
5	88175121522002	DALJEET KAUR		
6	88175121522004	HARPREET KAUR		
7	88175121522005	JASPREET KAUR		
8	88175121522006	JASPREET KAUR		
9	88175121522007	KARAMJEET KAUR		
10	88175121522008	LOVEPREET KAUR		
11	88175121522009	MANPREET KAUR		
12	88175121522010	PARWINDER KAUR		
13	88175121522011	POOJA		
14	88175121522012	RACHANDEEP KAUR		
15	88175121522013	RAJWINDER KAUR		
16	88175121522014	RITU		
17	88175121522015	SANDEEP KAUR		
18	88175121522016	SATVEER KAUR		
19	88175121522017	SIMRANJEET KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17511 / PRINCIPLE OF EDUCATION

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17512 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175121522001	AMANDEEP KAUR		
2	88175121522002	DALJEET KAUR		
3	88175121522004	HARPREET KAUR		
4	88175121522005	JASPREET KAUR		
5	88175121522006	JASPREET KAUR		
6	88175121522007	KARAMJEET KAUR		
7	88175121522008	LOVEPREET KAUR		
8	88175121522009	MANPREET KAUR		
9	88175121522010	PARWINDER KAUR		
10	88175121522011	POOJA		
11	88175121522012	RACHANDEEP KAUR		
12	88175121522013	RAJWINDER KAUR		
13	88175121522014	RITU		
14	88175121522015	SANDEEP KAUR		
15	88175121522016	SATVEER KAUR		
16	88175121522017	SIMRANJEET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17512 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17513 / PRACTICE OF TEACHING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175121522001	AMANDEEP KAUR		
2	88175121522002	DALJEET KAUR		
3	88175121522004	HARPREET KAUR		
4	88175121522005	JASPREET KAUR		
5	88175121522006	JASPREET KAUR		
6	88175121522007	KARAMJEET KAUR		
7	88175121522008	LOVEPREET KAUR		
8	88175121522009	MANPREET KAUR		
9	88175121522010	PARWINDER KAUR		
10	88175121522011	POOJA		
11	88175121522012	RACHANDEEP KAUR		
12	88175121522013	RAJWINDER KAUR		
13	88175121522014	RITU		
14	88175121522015	SANDEEP KAUR		
15	88175121522016	SATVEER KAUR		
16	88175121522017	SIMRANJEET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17513 / PRACTICE OF TEACHING

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17525 / PRACTICAL IV-A (MEN GARMENTS)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175121522001	AMANDEEP KAUR		
2	88175121522002	DALJEET KAUR		
3	88175121522004	HARPREET KAUR		
4	88175121522005	JASPREET KAUR		
5	88175121522006	JASPREET KAUR		
6	88175121522007	KARAMJEET KAUR		
7	88175121522008	LOVEPREET KAUR		
8	88175121522009	MANPREET KAUR		
9	88175121522010	PARWINDER KAUR		
10	88175121522011	POOJA		
11	88175121522012	RACHANDEEP KAUR		
12	88175121522013	RAJWINDER KAUR		
13	88175121522014	RITU		
14	88175121522015	SANDEEP KAUR		
15	88175121522016	SATVEER KAUR		
16	88175121522017	SIMRANJEET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17525 / PRACTICAL IV-A (MEN GARMENTS)

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17526 / PRACTICAL IV-B (WOMEN GARMENTS)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175121522001	AMANDEEP KAUR		
2	88175121522002	DALJEET KAUR		
3	88175121522004	HARPREET KAUR		
4	88175121522005	JASPREET KAUR		
5	88175121522006	JASPREET KAUR		
6	88175121522007	KARAMJEET KAUR		
7	88175121522008	LOVEPREET KAUR		
8	88175121522009	MANPREET KAUR		
9	88175121522010	PARWINDER KAUR		
10	88175121522011	POOJA		
11	88175121522012	RACHANDEEP KAUR		
12	88175121522013	RAJWINDER KAUR		
13	88175121522014	RITU		
14	88175121522015	SANDEEP KAUR		
15	88175121522016	SATVEER KAUR		
16	88175121522017	SIMRANJEET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17526 / PRACTICAL IV-B (WOMEN GARMENTS)

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17527 / PRACTICAL IV-C (CHILD. GARMENTS)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175121522001	AMANDEEP KAUR		
2	88175121522002	DALJEET KAUR		
3	88175121522004	HARPREET KAUR		
4	88175121522005	JASPREET KAUR		
5	88175121522006	JASPREET KAUR		
6	88175121522007	KARAMJEET KAUR		
7	88175121522008	LOVEPREET KAUR		
8	88175121522009	MANPREET KAUR		
9	88175121522010	PARWINDER KAUR		
10	88175121522011	POOJA		
11	88175121522012	RACHANDEEP KAUR		
12	88175121522013	RAJWINDER KAUR		
13	88175121522014	RITU		
14	88175121522015	SANDEEP KAUR		
15	88175121522016	SATVEER KAUR		
16	88175121522017	SIMRANJEET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17527 / PRACTICAL IV-C (CHILD. GARMENTS)

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17528 / SCHEME WORK

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175121522001	AMANDEEP KAUR		
2	88175121522002	DALJEET KAUR		
3	88175121522004	HARPREET KAUR		
4	88175121522005	JASPREET KAUR		
5	88175121522006	JASPREET KAUR		
6	88175121522007	KARAMJEET KAUR		
7	88175121522008	LOVEPREET KAUR		
8	88175121522009	MANPREET KAUR		
9	88175121522010	PARWINDER KAUR		
10	88175121522011	POOJA		
11	88175121522012	RACHANDEEP KAUR		
12	88175121522013	RAJWINDER KAUR		
13	88175121522014	RITU		
14	88175121522015	SANDEEP KAUR		
15	88175121522016	SATVEER KAUR		
16	88175121522017	SIMRANJEET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17528 / SCHEME WORK

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 617 / MECHANIC DIESEL ENGINE

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88201121122019	BABITA KUMARI		
2	88201121122020	GURPREET KAUR		
3	88201121122021	JASKIRAT KAUR		
4	88201121122022	JASPREET KAUR		
5	88201121122023	KAJAL		
6	88201121122024	KIRAN JUNEJA		
7	88201121122025	MADHU		
8	88201121122026	MANISHA KUMARI		
9	88201121122027	MANJEET KAUR		
10	88201121122028	MUKKO KAUR		
11	88201121122029	NANCY		
12	88201121122030	NEELAM SHARMA		
13	88201121122031	NEHA RANI		
14	88201121122032	PAWANPREET KAUR		
15	88201121122034	RINKA DEVI		
16	88201121122035	SAMANDEEP KAUR		
17	88201121122036	SANDEEP KAUR		
18	88201121122037	SHIVANI		
19	88201121122038	SUCHI KUMARI		
20	88201121122039	SUKHPAL KAUR		
21	88201121122040	SUNITA DEVI		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 617 / MECHANIC DIESEL ENGINE

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88201121122041	TINU		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 617 / MECHANIC DIESEL ENGINE

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88201121122019	BABITA KUMARI		
2	88201121122020	GURPREET KAUR		
3	88201121122021	JASKIRAT KAUR		
4	88201121122022	JASPREET KAUR		
5	88201121122023	KAJAL		
6	88201121122024	KIRAN JUNEJA		
7	88201121122025	MADHU		
8	88201121122026	MANISHA KUMARI		
9	88201121122027	MANJEET KAUR		
10	88201121122028	MUKKO KAUR		
11	88201121122029	NANCY		
12	88201121122030	NEELAM SHARMA		
13	88201121122031	NEHA RANI		
14	88201121122032	PAWANPREET KAUR		
15	88201121122034	RINKA DEVI		
16	88201121122035	SAMANDEEP KAUR		
17	88201121122036	SANDEEP KAUR		
18	88201121122037	SHIVANI		
19	88201121122038	SUCHI KUMARI		
20	88201121122039	SUKHPAL KAUR		
21	88201121122040	SUNITA DEVI		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 617 / MECHANIC DIESEL ENGINE

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88201121122041	TINU		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 617 / MECHANIC DIESEL ENGINE

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88201121122019	BABITA KUMARI		
2	88201121122020	GURPREET KAUR		
3	88201121122021	JASKIRAT KAUR		
4	88201121122022	JASPREET KAUR		
5	88201121122023	KAJAL		
6	88201121122024	KIRAN JUNEJA		
7	88201121122025	MADHU		
8	88201121122026	MANISHA KUMARI		
9	88201121122027	MANJEET KAUR		
10	88201121122028	MUKKO KAUR		
11	88201121122029	NANCY		
12	88201121122030	NEELAM SHARMA		
13	88201121122031	NEHA RANI		
14	88201121122032	PAWANPREET KAUR		
15	88201121122034	RINKA DEVI		
16	88201121122035	SAMANDEEP KAUR		
17	88201121122036	SANDEEP KAUR		
18	88201121122037	SHIVANI		
19	88201121122038	SUCHI KUMARI		
20	88201121122039	SUKHPAL KAUR		
21	88201121122040	SUNITA DEVI		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 617 / MECHANIC DIESEL ENGINE

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88201121122041	TINU		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 651 / COSMETOLOGY

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88239121122044	GAGANDEEP KAUR		
2	88239121122046	HARJOT KAUR		
3	88239121122047	HARMANJIT KAUR		
4	88239121122048	HARPREET KAUR		
5	88239121122051	JASVEER KAUR		
6	88239121122054	MAMTA RANI		
7	88239121122056	MANJU		
8	88239121122058	RAMANJOT KAUR		
9	88239121122061	SUKHWINDER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 651 / COSMETOLOGY

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88239121122044	GAGANDEEP KAUR		
2	88239121122046	HARJOT KAUR		
3	88239121122047	HARMANJIT KAUR		
4	88239121122048	HARPREET KAUR		
5	88239121122051	JASVEER KAUR		
6	88239121122054	MAMTA RANI		
7	88239121122056	MANJU		
8	88239121122058	RAMANJOT KAUR		
9	88239121122061	SUKHWINDER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 651 / COSMETOLOGY

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88239121122044	GAGANDEEP KAUR		
2	88239121122046	HARJOT KAUR		
3	88239121122047	HARMANJIT KAUR		
4	88239121122048	HARPREET KAUR		
5	88239121122051	JASVEER KAUR		
6	88239121122054	MAMTA RANI		
7	88239121122056	MANJU		
8	88239121122058	RAMANJOT KAUR		
9	88239121122061	SUKHWINDER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 658 / SEWING TECHNOLOGY

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88247121622021	DALJIT KAUR		
2	88247121622022	GURJEET KAUR		
3	88247121622023	GURPREET KAUR		
4	88247121622024	HARMANPREET SINGH		
5	88247121622026	JASPREET KAUR		
6	88247121622027	KIRTI		
7	88247121622028	PRABHJOT KAUR		
8	88247121622029	RAMANJEET KAUR		
9	88247121622030	RUPINDER KAUR		
10	88247121622031	SANDEEP KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 658 / SEWING TECHNOLOGY

Class: First

Subject : 44431 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 658 / SEWING TECHNOLOGY

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88247121621031	JASVEER KAUR		
2	88247121622021	DALJIT KAUR		
3	88247121622022	GURJEET KAUR		
4	88247121622023	GURPREET KAUR		
5	88247121622024	HARMANPREET SINGH		
6	88247121622026	JASPREET KAUR		
7	88247121622027	KIRTI		
8	88247121622028	PRABHJOT KAUR		
9	88247121622029	RAMANJEET KAUR		
10	88247121622030	RUPINDER KAUR		
11	88247121622031	SANDEEP KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 658 / SEWING TECHNOLOGY

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 658 / SEWING TECHNOLOGY

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88247121622021	DALJIT KAUR		
2	88247121622022	GURJEET KAUR		
3	88247121622023	GURPREET KAUR		
4	88247121622024	HARMANPREET SINGH		
5	88247121622026	JASPREET KAUR		
6	88247121622027	KIRTI		
7	88247121622028	PRABHJOT KAUR		
8	88247121622029	RAMANJEET KAUR		
9	88247121622030	RUPINDER KAUR		
10	88247121622031	SANDEEP KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 658 / SEWING TECHNOLOGY

Class: First

Subject : 44435 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 661 / COMPUTER HARDWARE AND NETWORK MAINTENANCE Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88264121121027	GAGANDEEP KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 661 / COMPUTER HARDWARE AND NETWORK MAINTENANCE Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88264121121027	GAGANDEEP KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 664 / PUNJABI STENOGRAPHY

Class: First

Subject : 17411 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88174121122062	AMANJEET KAUR		
2	88174121122063	AMANPREET KAUR		
3	88174121122064	AMANPREET KAUR		
4	88174121122065	AMRIT KAUR		
5	88174121122066	ARSHPREET KAUR		
6	88174121122067	GURLEEN KAUR		
7	88174121122068	GURLEEN KAUR		
8	88174121122069	HARJOT KAUR		
9	88174121122070	HARWINDER KAUR		
10	88174121122071	JASMEEN KAUR		
11	88174121122072	JASPREET KAUR		
12	88174121122075	MANPREET KAUR		
13	88174121122076	NAVJOT KAUR		
14	88174121122077	PARMINDER KAUR		
15	88174121122078	RAJVINDER KAUR		
16	88174121122080	SHARANPREET KAUR		
17	88174121122081	SUKHPREET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 664 / PUNJABI STENOGRAPHY

Class: First

Subject : 17411 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 664 / PUNJABI STENOGRAPHY

Class: First

Subject : 17414 / SOCIAL STUDIES

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88174121122062	AMANJEET KAUR		
2	88174121122063	AMANPREET KAUR		
3	88174121122064	AMANPREET KAUR		
4	88174121122065	AMRIT KAUR		
5	88174121122066	ARSHPREET KAUR		
6	88174121122067	GURLEEN KAUR		
7	88174121122068	GURLEEN KAUR		
8	88174121122069	HARJOT KAUR		
9	88174121122070	HARWINDER KAUR		
10	88174121122071	JASMEEN KAUR		
11	88174121122072	JASPREET KAUR		
12	88174121122075	MANPREET KAUR		
13	88174121122076	NAVJOT KAUR		
14	88174121122077	PARMINDER KAUR		
15	88174121122078	RAJVINDER KAUR		
16	88174121122080	SHARANPREET KAUR		
17	88174121122081	SUKHPREET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 664 / PUNJABI STENOGRAPHY

Class: First

Subject : 17414 / SOCIAL STUDIES

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 664 / PUNJABI STENOGRAPHY

Class: First

Subject : 17415 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88174121122062	AMANJEET KAUR		
2	88174121122063	AMANPREET KAUR		
3	88174121122064	AMANPREET KAUR		
4	88174121122065	AMRIT KAUR		
5	88174121122066	ARSHPREET KAUR		
6	88174121122067	GURLEEN KAUR		
7	88174121122068	GURLEEN KAUR		
8	88174121122069	HARJOT KAUR		
9	88174121122070	HARWINDER KAUR		
10	88174121122071	JASMEEN KAUR		
11	88174121122072	JASPREET KAUR		
12	88174121122075	MANPREET KAUR		
13	88174121122076	NAVJOT KAUR		
14	88174121122077	PARMINDER KAUR		
15	88174121122078	RAJVINDER KAUR		
16	88174121122080	SHARANPREET KAUR		
17	88174121122081	SUKHPREET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 664 / PUNJABI STENOGRAPHY

Class: First

Subject : 17415 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 664 / PUNJABI STENOGRAPHY

Class: First

Subject : 17416 / COGNATE

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88174121122062	AMANJEET KAUR		
2	88174121122063	AMANPREET KAUR		
3	88174121122064	AMANPREET KAUR		
4	88174121122065	AMRIT KAUR		
5	88174121122066	ARSHPREET KAUR		
6	88174121122067	GURLEEN KAUR		
7	88174121122068	GURLEEN KAUR		
8	88174121122069	HARJOT KAUR		
9	88174121122070	HARWINDER KAUR		
10	88174121122071	JASMEEN KAUR		
11	88174121122072	JASPREET KAUR		
12	88174121122075	MANPREET KAUR		
13	88174121122076	NAVJOT KAUR		
14	88174121122077	PARMINDER KAUR		
15	88174121122078	RAJVINDER KAUR		
16	88174121122080	SHARANPREET KAUR		
17	88174121122081	SUKHPREET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course : 664 / PUNJABI STENOGRAPHY

Class: First

Subject : 17416 / COGNATE

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 132 / ELECTRICIAN

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231220321008	HIMAT SINGH		
2	88231220321013	MOHAN SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 132 / ELECTRICIAN

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231220321008	HIMAT SINGH		
2	88231220321013	MOHAN SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 132 / ELECTRICIAN

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231220321008	HIMAT SINGH		
2	88231220321013	MOHAN SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44423 / ENGINEERING DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231220319048	SARABJEET SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44441 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231220321001	AJAY KUMAR		
2	88231220321002	AMRITPAL SINGH		
3	88231220321003	AMRITPAL SINGH		
4	88231220321004	BHUPESH SINGH		
5	88231220321005	GURPREET SINGH		
6	88231220321006	GURPREET SINGH		
7	88231220321007	HARISH KUMAR		
8	88231220321009	INDERJEET SINGH		
9	88231220321010	INDERJIT SINGH		
10	88231220321011	MAKHAN SINGH		
11	88231220321012	MANJIT SINGH		
12	88231220321014	MOHIT KUMAR		
13	88231220321015	OM PARKASH		
14	88231220321016	PRATHAM SARPATA		
15	88231220321017	ROHIT KUMAR		
16	88231220321018	SANJAY KUMAR		
17	88231220321019	SATNAM SINGH		
18	88231220321020	VINAY ATWAL		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44441 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44444 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231220321001	AJAY KUMAR		
2	88231220321002	AMRITPAL SINGH		
3	88231220321003	AMRITPAL SINGH		
4	88231220321004	BHUPESH SINGH		
5	88231220321005	GURPREET SINGH		
6	88231220321006	GURPREET SINGH		
7	88231220321007	HARISH KUMAR		
8	88231220321009	INDERJEET SINGH		
9	88231220321010	INDERJIT SINGH		
10	88231220321011	MAKHAN SINGH		
11	88231220321012	MANJIT SINGH		
12	88231220321014	MOHIT KUMAR		
13	88231220321015	OM PARKASH		
14	88231220321016	PRATHAM SARPATA		
15	88231220321017	ROHIT KUMAR		
16	88231220321018	SANJAY KUMAR		
17	88231220321019	SATNAM SINGH		
18	88231220321020	VINAY ATWAL		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44444 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44445 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231220321001	AJAY KUMAR		
2	88231220321002	AMRITPAL SINGH		
3	88231220321003	AMRITPAL SINGH		
4	88231220321004	BHUPESH SINGH		
5	88231220321005	GURPREET SINGH		
6	88231220321006	GURPREET SINGH		
7	88231220321007	HARISH KUMAR		
8	88231220321009	INDERJEET SINGH		
9	88231220321010	INDERJIT SINGH		
10	88231220321011	MAKHAN SINGH		
11	88231220321012	MANJIT SINGH		
12	88231220321014	MOHIT KUMAR		
13	88231220321015	OM PARKASH		
14	88231220321016	PRATHAM SARPATA		
15	88231220321017	ROHIT KUMAR		
16	88231220321018	SANJAY KUMAR		
17	88231220321019	SATNAM SINGH		
18	88231220321020	VINAY ATWAL		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44445 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17511 / PRINCIPLE OF EDUCATION

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175120521016	MEENA RANI		
2	88175120521023	SIMRANJEET KAUR		
3	88175120522001	AMANJYOTI		
4	88175120522003	ANJALI		
5	88175120522004	ANKITA		
6	88175120522005	ANKITA RANI		
7	88175120522006	ANURADHA		
8	88175120522008	HARSIMRAN KAUR		
9	88175120522009	HIMANI		
10	88175120522010	JASVINDER KAUR		
11	88175120522011	JYOTI		
12	88175120522012	KIRNA		
13	88175120522013	KULWINDER KAUR		
14	88175120522014	MANPREET KAUR		
15	88175120522015	NAMIKA		
16	88175120522016	NAVJEET KAUR		
17	88175120522017	NITASHA		
18	88175120522018	POONAM RANI		
19	88175120522019	PRIYA RANI		
20	88175120522020	RAJNI DEVI		
21	88175120522021	RENUKA		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17511 / PRINCIPLE OF EDUCATION

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88175120522022	RESHAM KAUR		
23	88175120522023	RUKMANI DEVI		
24	88175120522024	RUPA DEVI		
25	88175120522025	SHIKHA DEVI		
26	88175120522026	SIMRAN KUMARI		
27	88175120522027	SIMRANJEET KAUR		
28	88175120522028	SUKHJEET KAUR		
29	88175123122001	ANJU SHARMA		
30	88175123122002	PRIYA.		
31	88175123122003	RANJANA.		
32	88175123122004	RIMPY.		
33	88175123122005	SUNITA RANI.		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17511 / PRINCIPLE OF EDUCATION

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17512 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175120520019	MONIKA		
2	88175120522001	AMANJYOTI		
3	88175120522003	ANJALI		
4	88175120522004	ANKITA		
5	88175120522005	ANKITA RANI		
6	88175120522006	ANURADHA		
7	88175120522008	HARSIMRAN KAUR		
8	88175120522009	HIMANI		
9	88175120522010	JASVINDER KAUR		
10	88175120522011	JYOTI		
11	88175120522012	KIRNA		
12	88175120522013	KULWINDER KAUR		
13	88175120522014	MANPREET KAUR		
14	88175120522015	NAMIKA		
15	88175120522016	NAVJEET KAUR		
16	88175120522017	NITASHA		
17	88175120522018	POONAM RANI		
18	88175120522019	PRIYA RANI		
19	88175120522020	RAJNI DEVI		
20	88175120522021	RENUKA		
21	88175120522022	RESHAM KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17512 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88175120522023	RUKMANI DEVI		
23	88175120522024	RUPA DEVI		
24	88175120522025	SHIKHA DEVI		
25	88175120522026	SIMRAN KUMARI		
26	88175120522027	SIMRANJEET KAUR		
27	88175120522028	SUKHJEET KAUR		
28	88175123120008	NEELAM RANI KALER		
29	88175123122001	ANJU SHARMA		
30	88175123122002	PRIYA.		
31	88175123122003	RANJANA.		
32	88175123122004	RIMPY.		
33	88175123122005	SUNITA RANI.		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17512 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17513 / PRACTICE OF TEACHING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175120522001	AMANJYOTI		
2	88175120522003	ANJALI		
3	88175120522004	ANKITA		
4	88175120522005	ANKITA RANI		
5	88175120522006	ANURADHA		
6	88175120522008	HARSIMRAN KAUR		
7	88175120522009	HIMANI		
8	88175120522010	JASVINDER KAUR		
9	88175120522011	JYOTI		
10	88175120522012	KIRNA		
11	88175120522013	KULWINDER KAUR		
12	88175120522014	MANPREET KAUR		
13	88175120522015	NAMIKA		
14	88175120522016	NAVJEET KAUR		
15	88175120522017	NITASHA		
16	88175120522018	POONAM RANI		
17	88175120522019	PRIYA RANI		
18	88175120522020	RAJNI DEVI		
19	88175120522021	RENUKA		
20	88175120522022	RESHAM KAUR		
21	88175120522023	RUKMANI DEVI		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17513 / PRACTICE OF TEACHING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88175120522024	RUPA DEVI		
23	88175120522025	SHIKHA DEVI		
24	88175120522026	SIMRAN KUMARI		
25	88175120522027	SIMRANJEET KAUR		
26	88175120522028	SUKHJEET KAUR		
27	88175123122001	ANJU SHARMA		
28	88175123122002	PRIYA.		
29	88175123122003	RANJANA.		
30	88175123122004	RIMPY.		
31	88175123122005	SUNITA RANI.		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17513 / PRACTICE OF TEACHING

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17525 / PRACTICAL IV-A (MEN GARMENTS)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175120522001	AMANJYOTI		
2	88175120522003	ANJALI		
3	88175120522004	ANKITA		
4	88175120522005	ANKITA RANI		
5	88175120522006	ANURADHA		
6	88175120522008	HARSIMRAN KAUR		
7	88175120522009	HIMANI		
8	88175120522010	JASVINDER KAUR		
9	88175120522011	JYOTI		
10	88175120522012	KIRNA		
11	88175120522013	KULWINDER KAUR		
12	88175120522014	MANPREET KAUR		
13	88175120522015	NAMIKA		
14	88175120522016	NAVJEET KAUR		
15	88175120522017	NITASHA		
16	88175120522018	POONAM RANI		
17	88175120522019	PRIYA RANI		
18	88175120522020	RAJNI DEVI		
19	88175120522021	RENUKA		
20	88175120522022	RESHAM KAUR		
21	88175120522023	RUKMANI DEVI		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17525 / PRACTICAL IV-A (MEN GARMENTS)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88175120522024	RUPA DEVI		
23	88175120522025	SHIKHA DEVI		
24	88175120522026	SIMRAN KUMARI		
25	88175120522027	SIMRANJEET KAUR		
26	88175120522028	SUKHJEET KAUR		
27	88175123122001	ANJU SHARMA		
28	88175123122002	PRIYA.		
29	88175123122003	RANJANA.		
30	88175123122004	RIMPY.		
31	88175123122005	SUNITA RANI.		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17525 / PRACTICAL IV-A (MEN GARMENTS)

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17526 / PRACTICAL IV-B (WOMEN GARMENTS)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175120522001	AMANJYOTI		
2	88175120522003	ANJALI		
3	88175120522004	ANKITA		
4	88175120522005	ANKITA RANI		
5	88175120522006	ANURADHA		
6	88175120522008	HARSIMRAN KAUR		
7	88175120522009	HIMANI		
8	88175120522010	JASVINDER KAUR		
9	88175120522011	JYOTI		
10	88175120522012	KIRNA		
11	88175120522013	KULWINDER KAUR		
12	88175120522014	MANPREET KAUR		
13	88175120522015	NAMIKA		
14	88175120522016	NAVJEET KAUR		
15	88175120522017	NITASHA		
16	88175120522018	POONAM RANI		
17	88175120522019	PRIYA RANI		
18	88175120522020	RAJNI DEVI		
19	88175120522021	RENUKA		
20	88175120522022	RESHAM KAUR		
21	88175120522023	RUKMANI DEVI		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17526 / PRACTICAL IV-B (WOMEN GARMENTS)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88175120522024	RUPA DEVI		
23	88175120522025	SHIKHA DEVI		
24	88175120522026	SIMRAN KUMARI		
25	88175120522027	SIMRANJEET KAUR		
26	88175120522028	SUKHJEET KAUR		
27	88175123122001	ANJU SHARMA		
28	88175123122002	PRIYA.		
29	88175123122003	RANJANA.		
30	88175123122004	RIMPY.		
31	88175123122005	SUNITA RANI.		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17526 / PRACTICAL IV-B (WOMEN GARMENTS)

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17527 / PRACTICAL IV-C (CHILD. GARMENTS)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175120522001	AMANJYOTI		
2	88175120522003	ANJALI		
3	88175120522004	ANKITA		
4	88175120522005	ANKITA RANI		
5	88175120522006	ANURADHA		
6	88175120522008	HARSIMRAN KAUR		
7	88175120522009	HIMANI		
8	88175120522010	JASVINDER KAUR		
9	88175120522011	JYOTI		
10	88175120522012	KIRNA		
11	88175120522013	KULWINDER KAUR		
12	88175120522014	MANPREET KAUR		
13	88175120522015	NAMIKA		
14	88175120522016	NAVJEET KAUR		
15	88175120522017	NITASHA		
16	88175120522018	POONAM RANI		
17	88175120522019	PRIYA RANI		
18	88175120522020	RAJNI DEVI		
19	88175120522021	RENUKA		
20	88175120522022	RESHAM KAUR		
21	88175120522023	RUKMANI DEVI		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17527 / PRACTICAL IV-C (CHILD. GARMENTS)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88175120522024	RUPA DEVI		
23	88175120522025	SHIKHA DEVI		
24	88175120522026	SIMRAN KUMARI		
25	88175120522027	SIMRANJEET KAUR		
26	88175120522028	SUKHJEET KAUR		
27	88175123122001	ANJU SHARMA		
28	88175123122002	PRIYA.		
29	88175123122003	RANJANA.		
30	88175123122004	RIMPY.		
31	88175123122005	SUNITA RANI.		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17527 / PRACTICAL IV-C (CHILD. GARMENTS)

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17528 / SCHEME WORK

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175120522001	AMANJYOTI		
2	88175120522003	ANJALI		
3	88175120522004	ANKITA		
4	88175120522005	ANKITA RANI		
5	88175120522006	ANURADHA		
6	88175120522008	HARSIMRAN KAUR		
7	88175120522009	HIMANI		
8	88175120522010	JASVINDER KAUR		
9	88175120522011	JYOTI		
10	88175120522012	KIRNA		
11	88175120522013	KULWINDER KAUR		
12	88175120522014	MANPREET KAUR		
13	88175120522015	NAMIKA		
14	88175120522016	NAVJEET KAUR		
15	88175120522017	NITASHA		
16	88175120522018	POONAM RANI		
17	88175120522019	PRIYA RANI		
18	88175120522020	RAJNI DEVI		
19	88175120522021	RENUKA		
20	88175120522022	RESHAM KAUR		
21	88175120522023	RUKMANI DEVI		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17528 / SCHEME WORK

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88175120522024	RUPA DEVI		
23	88175120522025	SHIKHA DEVI		
24	88175120522026	SIMRAN KUMARI		
25	88175120522027	SIMRANJEET KAUR		
26	88175120522028	SUKHJEET KAUR		
27	88175123122001	ANJU SHARMA		
28	88175123122002	PRIYA.		
29	88175123122003	RANJANA.		
30	88175123122004	RIMPY.		
31	88175123122005	SUNITA RANI.		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17528 / SCHEME WORK

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 658 / SEWING TECHNOLOGY

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88247120422001	AANCHAL		
2	88247120422002	AMARDEEP KAUR		
3	88247120422004	ANITA DEVI		
4	88247120422005	ANURADHA		
5	88247120422006	DIVYA JYOTI		
6	88247120422007	HARJEET KAUR		
7	88247120422008	JASPREET KAUR		
8	88247120422009	KAJAL		
9	88247120422010	MADHU DEVI		
10	88247120422011	MALIKA SHARMA		
11	88247120422012	MANPREET KAUR		
12	88247120422013	MS. SHIVANI SAINI		
13	88247120422014	MUSKAN		
14	88247120422015	NEHA DEVI		
15	88247120422016	PAYAL		
16	88247120422017	PRIYANKA		
17	88247120422018	PRIYANKA CHOUDHARY		
18	88247120422019	RAJNI DEVI		
19	88247120422020	SUMAN KUMARI		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 658 / SEWING TECHNOLOGY

Class: First

Subject : 44431 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 658 / SEWING TECHNOLOGY

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88247120422001	AANCHAL		
2	88247120422002	AMARDEEP KAUR		
3	88247120422004	ANITA DEVI		
4	88247120422005	ANURADHA		
5	88247120422006	DIVYA JYOTI		
6	88247120422007	HARJEET KAUR		
7	88247120422008	JASPREET KAUR		
8	88247120422009	KAJAL		
9	88247120422010	MADHU DEVI		
10	88247120422011	MALIKA SHARMA		
11	88247120422012	MANPREET KAUR		
12	88247120422013	MS. SHIVANI SAINI		
13	88247120422014	MUSKAN		
14	88247120422015	NEHA DEVI		
15	88247120422016	PAYAL		
16	88247120422017	PRIYANKA		
17	88247120422018	PRIYANKA CHOUDHARY		
18	88247120422019	RAJNI DEVI		
19	88247120422020	SUMAN KUMARI		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 658 / SEWING TECHNOLOGY

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 658 / SEWING TECHNOLOGY

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88247120422001	AANCHAL		
2	88247120422002	AMARDEEP KAUR		
3	88247120422004	ANITA DEVI		
4	88247120422005	ANURADHA		
5	88247120422006	DIVYA JYOTI		
6	88247120422007	HARJEET KAUR		
7	88247120422008	JASPREET KAUR		
8	88247120422009	KAJAL		
9	88247120422010	MADHU DEVI		
10	88247120422011	MALIKA SHARMA		
11	88247120422012	MANPREET KAUR		
12	88247120422013	MS. SHIVANI SAINI		
13	88247120422014	MUSKAN		
14	88247120422015	NEHA DEVI		
15	88247120422016	PAYAL		
16	88247120422017	PRIYANKA		
17	88247120422018	PRIYANKA CHOUDHARY		
18	88247120422019	RAJNI DEVI		
19	88247120422020	SUMAN KUMARI		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 658 / SEWING TECHNOLOGY

Class: First

Subject : 44435 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 664 / PUNJABI STENOGRAPHY

Class: First

Subject : 17411 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88174120522029	AMANJOT KAUR		
2	88174120522030	ANJU BALA		
3	88174120522031	ANKITA DEVI		
4	88174120522032	BANDANA		
5	88174120522033	CHANDERPAL		
6	88174120522034	CHARANJEET KAUR		
7	88174120522035	CHETAN SINGH		
8	88174120522037	GAGANDEEP		
9	88174120522038	HARPREET KAUR		
10	88174120522039	JASHANDEEP KAUR		
11	88174120522040	JASPREET KAUR		
12	88174120522041	JASVEER KAUR		
13	88174120522043	KIRANDEEP KAUR		
14	88174120522044	MANPREET SINGH		
15	88174120522045	NARINDER KAUR		
16	88174120522046	SIMRANJEET KAUR		
17	88174120522047	SUKHWINDER KAUR		
18	88174120522048	SURINDER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 664 / PUNJABI STENOGRAPHY

Class: First

Subject : 17411 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 664 / PUNJABI STENOGRAPHY

Class: First

Subject : 17414 / SOCIAL STUDIES

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88174120522029	AMANJOT KAUR		
2	88174120522030	ANJU BALA		
3	88174120522031	ANKITA DEVI		
4	88174120522032	BANDANA		
5	88174120522033	CHANDERPAL		
6	88174120522034	CHARANJEET KAUR		
7	88174120522035	CHETAN SINGH		
8	88174120522037	GAGANDEEP		
9	88174120522038	HARPREET KAUR		
10	88174120522039	JASHANDEEP KAUR		
11	88174120522040	JASPREET KAUR		
12	88174120522041	JASVEER KAUR		
13	88174120522043	KIRANDEEP KAUR		
14	88174120522044	MANPREET SINGH		
15	88174120522045	NARINDER KAUR		
16	88174120522046	SIMRANJEET KAUR		
17	88174120522047	SUKHWINDER KAUR		
18	88174120522048	SURINDER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 664 / PUNJABI STENOGRAPHY Class: First

Subject : 17414 / SOCIAL STUDIES

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 664 / PUNJABI STENOGRAPHY

Class: First

Subject : 17415 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88174120522029	AMANJOT KAUR		
2	88174120522030	ANJU BALA		
3	88174120522031	ANKITA DEVI		
4	88174120522032	BANDANA		
5	88174120522033	CHANDERPAL		
6	88174120522034	CHARANJEET KAUR		
7	88174120522035	CHETAN SINGH		
8	88174120522037	GAGANDEEP		
9	88174120522038	HARPREET KAUR		
10	88174120522039	JASHANDEEP KAUR		
11	88174120522040	JASPREET KAUR		
12	88174120522041	JASVEER KAUR		
13	88174120522043	KIRANDEEP KAUR		
14	88174120522044	MANPREET SINGH		
15	88174120522045	NARINDER KAUR		
16	88174120522046	SIMRANJEET KAUR		
17	88174120522047	SUKHWINDER KAUR		
18	88174120522048	SURINDER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 664 / PUNJABI STENOGRAPHY Class: First

Subject : 17415 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 664 / PUNJABI STENOGRAPHY

Class: First

Subject : 17416 / COGNATE

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88174120522029	AMANJOT KAUR		
2	88174120522030	ANJU BALA		
3	88174120522031	ANKITA DEVI		
4	88174120522032	BANDANA		
5	88174120522033	CHANDERPAL		
6	88174120522034	CHARANJEET KAUR		
7	88174120522035	CHETAN SINGH		
8	88174120522037	GAGANDEEP		
9	88174120522038	HARPREET KAUR		
10	88174120522039	JASHANDEEP KAUR		
11	88174120522040	JASPREET KAUR		
12	88174120522041	JASVEER KAUR		
13	88174120522043	KIRANDEEP KAUR		
14	88174120522044	MANPREET SINGH		
15	88174120522045	NARINDER KAUR		
16	88174120522046	SIMRANJEET KAUR		
17	88174120522047	SUKHWINDER KAUR		
18	88174120522048	SURINDER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 664 / PUNJABI STENOGRAPHY Class: First

Subject : 17416 / COGNATE

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17051 / PAINTING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370223121008	JITENDER SINGH		
2	88370223122006	AJAY SINGH		
3	88370223122007	AKSHIT		
4	88370223122008	ANIKET		
5	88370223122009	ANJALI KUMARI		
6	88370223122010	BALDEV		
7	88370223122011	BANITA SAINI		
8	88370223122012	CHAMAN LAL		
9	88370223122013	DEVINDER KUMAR		
10	88370223122014	DHARMINDER SINGH		
11	88370223122015	DHEERAJ KUMAR		
12	88370223122016	GRUDEV SINGH		
13	88370223122017	GULSHAN KUMAR		
14	88370223122018	GURMEL SINGH		
15	88370223122019	GURPAL SINGH		
16	88370223122020	JASVEER SINGH		
17	88370223122021	KANIKA THAKUR		
18	88370223122022	MADHU DEVI		
19	88370223122023	MANPREET KAUR		
20	88370223122024	MEHAKPREET KAUR		
21	88370223122025	NAINAKSHI		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17051 / PAINTING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88370223122026	NEEKITA SAINI.		
23	88370223122027	NIKITA RANA		
24	88370223122028	PANKAJ SHARMA		
25	88370223122029	PRATIBHA		
26	88370223122030	RAGHU BIR SINGH		
27	88370223122031	RAHUL KAPOOR		
28	88370223122032	RAHUL KUMAR		
29	88370223122033	RAJEEV KUMAR		
30	88370223122035	SANJEEV KUMAR		
31	88370223122036	SANJEEV KUMAR		
32	88370223122037	SATISH KUMAR		
33	88370223122038	SATWANT SINGH		
34	88370223122039	SHAGUN		
35	88370223122040	SONU DEVI		
36	88370223122041	SUMAN DEVI		
37	88370223122042	SUNIL KUMAR		
38	88370223122043	SUNITA KUMARI		
39	88370223122044	VICKY KUMAR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: First

Subject : 17051 / PAINTING

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: First

Subject : 17055 / CRAFT (T)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370223121007	JARNAIL SINGH		
2	88370223121008	JITENDER SINGH		
3	88370223122006	AJAY SINGH		
4	88370223122007	AKSHIT		
5	88370223122008	ANIKET		
6	88370223122009	ANJALI KUMARI		
7	88370223122010	BALDEV		
8	88370223122011	BANITA SAINI		
9	88370223122012	CHAMAN LAL		
10	88370223122013	DEVINDER KUMAR		
11	88370223122014	DHARMINDER SINGH		
12	88370223122015	DHEERAJ KUMAR		
13	88370223122016	GRUDEV SINGH		
14	88370223122017	GULSHAN KUMAR		
15	88370223122018	GURMEL SINGH		
16	88370223122019	GURPAL SINGH		
17	88370223122020	JASVEER SINGH		
18	88370223122021	KANIKA THAKUR		
19	88370223122022	MADHU DEVI		
20	88370223122023	MANPREET KAUR		
21	88370223122024	MEHAKPREET KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17055 / CRAFT (T)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88370223122025	NAINAKSHI		
23	88370223122026	NEEKITA SAINI.		
24	88370223122027	NIKITA RANA		
25	88370223122028	PANKAJ SHARMA		
26	88370223122029	PRATIBHA		
27	88370223122030	RAGHU BIR SINGH		
28	88370223122031	RAHUL KAPOOR		
29	88370223122032	RAHUL KUMAR		
30	88370223122033	RAJEEV KUMAR		
31	88370223122035	SANJEEV KUMAR		
32	88370223122036	SANJEEV KUMAR		
33	88370223122037	SATISH KUMAR		
34	88370223122038	SATWANT SINGH		
35	88370223122039	SHAGUN		
36	88370223122040	SONU DEVI		
37	88370223122041	SUMAN DEVI		
38	88370223122042	SUNIL KUMAR		
39	88370223122043	SUNITA KUMARI		
40	88370223122044	VICKY KUMAR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: First

Subject : 17055 / CRAFT (T)

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17059 / DESIGN

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370223121008	JITENDER SINGH		
2	88370223122006	AJAY SINGH		
3	88370223122007	AKSHIT		
4	88370223122008	ANIKET		
5	88370223122009	ANJALI KUMARI		
6	88370223122010	BALDEV		
7	88370223122011	BANITA SAINI		
8	88370223122012	CHAMAN LAL		
9	88370223122013	DEVINDER KUMAR		
10	88370223122014	DHARMINDER SINGH		
11	88370223122015	DHEERAJ KUMAR		
12	88370223122016	GRUDEV SINGH		
13	88370223122017	GULSHAN KUMAR		
14	88370223122018	GURMEL SINGH		
15	88370223122019	GURPAL SINGH		
16	88370223122020	JASVEER SINGH		
17	88370223122021	KANIKA THAKUR		
18	88370223122022	MADHU DEVI		
19	88370223122023	MANPREET KAUR		
20	88370223122024	MEHAKPREET KAUR		
21	88370223122025	NAINAKSHI		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17059 / DESIGN

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88370223122026	NEEKITA SAINI.		
23	88370223122027	NIKITA RANA		
24	88370223122028	PANKAJ SHARMA		
25	88370223122029	PRATIBHA		
26	88370223122030	RAGHU BIR SINGH		
27	88370223122031	RAHUL KAPOOR		
28	88370223122032	RAHUL KUMAR		
29	88370223122033	RAJEEV KUMAR		
30	88370223122035	SANJEEV KUMAR		
31	88370223122036	SANJEEV KUMAR		
32	88370223122037	SATISH KUMAR		
33	88370223122038	SATWANT SINGH		
34	88370223122039	SHAGUN		
35	88370223122040	SONU DEVI		
36	88370223122041	SUMAN DEVI		
37	88370223122042	SUNIL KUMAR		
38	88370223122043	SUNITA KUMARI		
39	88370223122044	VICKY KUMAR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: First

Subject : 17059 / DESIGN

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17060 / STILL LIFE

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370223121008	JITENDER SINGH		
2	88370223122006	AJAY SINGH		
3	88370223122007	AKSHIT		
4	88370223122008	ANIKET		
5	88370223122009	ANJALI KUMARI		
6	88370223122010	BALDEV		
7	88370223122011	BANITA SAINI		
8	88370223122012	CHAMAN LAL		
9	88370223122013	DEVINDER KUMAR		
10	88370223122014	DHARMINDER SINGH		
11	88370223122015	DHEERAJ KUMAR		
12	88370223122016	GRUDEV SINGH		
13	88370223122017	GULSHAN KUMAR		
14	88370223122018	GURMEL SINGH		
15	88370223122019	GURPAL SINGH		
16	88370223122020	JASVEER SINGH		
17	88370223122021	KANIKA THAKUR		
18	88370223122022	MADHU DEVI		
19	88370223122023	MANPREET KAUR		
20	88370223122024	MEHAKPREET KAUR		
21	88370223122025	NAINAKSHI		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17060 / STILL LIFE

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88370223122026	NEEKITA SAINI.		
23	88370223122027	NIKITA RANA		
24	88370223122028	PANKAJ SHARMA		
25	88370223122029	PRATIBHA		
26	88370223122030	RAGHU BIR SINGH		
27	88370223122031	RAHUL KAPOOR		
28	88370223122032	RAHUL KUMAR		
29	88370223122033	RAJEEV KUMAR		
30	88370223122035	SANJEEV KUMAR		
31	88370223122036	SANJEEV KUMAR		
32	88370223122037	SATISH KUMAR		
33	88370223122038	SATWANT SINGH		
34	88370223122039	SHAGUN		
35	88370223122040	SONU DEVI		
36	88370223122041	SUMAN DEVI		
37	88370223122042	SUNIL KUMAR		
38	88370223122043	SUNITA KUMARI		
39	88370223122044	VICKY KUMAR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: First

Subject : 17060 / STILL LIFE

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17065 / CRAFT (P)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370223121008	JITENDER SINGH		
2	88370223122006	AJAY SINGH		
3	88370223122007	AKSHIT		
4	88370223122008	ANIKET		
5	88370223122009	ANJALI KUMARI		
6	88370223122010	BALDEV		
7	88370223122011	BANITA SAINI		
8	88370223122012	CHAMAN LAL		
9	88370223122013	DEVINDER KUMAR		
10	88370223122014	DHARMINDER SINGH		
11	88370223122015	DHEERAJ KUMAR		
12	88370223122016	GRUDEV SINGH		
13	88370223122017	GULSHAN KUMAR		
14	88370223122018	GURMEL SINGH		
15	88370223122019	GURPAL SINGH		
16	88370223122020	JASVEER SINGH		
17	88370223122021	KANIKA THAKUR		
18	88370223122022	MADHU DEVI		
19	88370223122023	MANPREET KAUR		
20	88370223122024	MEHAKPREET KAUR		
21	88370223122025	NAINAKSHI		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17065 / CRAFT (P)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88370223122026	NEEKITA SAINI.		
23	88370223122027	NIKITA RANA		
24	88370223122028	PANKAJ SHARMA		
25	88370223122029	PRATIBHA		
26	88370223122030	RAGHU BIR SINGH		
27	88370223122031	RAHUL KAPOOR		
28	88370223122032	RAHUL KUMAR		
29	88370223122033	RAJEEV KUMAR		
30	88370223122035	SANJEEV KUMAR		
31	88370223122036	SANJEEV KUMAR		
32	88370223122037	SATISH KUMAR		
33	88370223122038	SATWANT SINGH		
34	88370223122039	SHAGUN		
35	88370223122040	SONU DEVI		
36	88370223122041	SUMAN DEVI		
37	88370223122042	SUNIL KUMAR		
38	88370223122043	SUNITA KUMARI		
39	88370223122044	VICKY KUMAR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: First

Subject : 17065 / CRAFT (P)

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17070 / PRINCIPLES OF EDUCATION

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370223121008	JITENDER SINGH		
2	88370223122006	AJAY SINGH		
3	88370223122007	AKSHIT		
4	88370223122008	ANIKET		
5	88370223122009	ANJALI KUMARI		
6	88370223122010	BALDEV		
7	88370223122011	BANITA SAINI		
8	88370223122012	CHAMAN LAL		
9	88370223122013	DEVINDER KUMAR		
10	88370223122014	DHARMINDER SINGH		
11	88370223122015	DHEERAJ KUMAR		
12	88370223122016	GRUDEV SINGH		
13	88370223122017	GULSHAN KUMAR		
14	88370223122018	GURMEL SINGH		
15	88370223122019	GURPAL SINGH		
16	88370223122020	JASVEER SINGH		
17	88370223122021	KANIKA THAKUR		
18	88370223122022	MADHU DEVI		
19	88370223122023	MANPREET KAUR		
20	88370223122024	MEHAKPREET KAUR		
21	88370223122025	NAINAKSHI		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17070 / PRINCIPLES OF EDUCATION

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88370223122026	NEEKITA SAINI.		
23	88370223122027	NIKITA RANA		
24	88370223122028	PANKAJ SHARMA		
25	88370223122029	PRATIBHA		
26	88370223122030	RAGHU BIR SINGH		
27	88370223122031	RAHUL KAPOOR		
28	88370223122032	RAHUL KUMAR		
29	88370223122033	RAJEEV KUMAR		
30	88370223122035	SANJEEV KUMAR		
31	88370223122036	SANJEEV KUMAR		
32	88370223122037	SATISH KUMAR		
33	88370223122038	SATWANT SINGH		
34	88370223122039	SHAGUN		
35	88370223122040	SONU DEVI		
36	88370223122041	SUMAN DEVI		
37	88370223122042	SUNIL KUMAR		
38	88370223122043	SUNITA KUMARI		
39	88370223122044	VICKY KUMAR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: First

Subject : 17070 / PRINCIPLES OF EDUCATION

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17071 / HISTORY & APPRECIATION OF ART

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370223121008	JITENDER SINGH		
2	88370223122006	AJAY SINGH		
3	88370223122007	AKSHIT		
4	88370223122008	ANIKET		
5	88370223122009	ANJALI KUMARI		
6	88370223122010	BALDEV		
7	88370223122011	BANITA SAINI		
8	88370223122012	CHAMAN LAL		
9	88370223122013	DEVINDER KUMAR		
10	88370223122014	DHARMINDER SINGH		
11	88370223122015	DHEERAJ KUMAR		
12	88370223122016	GRUDEV SINGH		
13	88370223122017	GULSHAN KUMAR		
14	88370223122018	GURMEL SINGH		
15	88370223122019	GURPAL SINGH		
16	88370223122020	JASVEER SINGH		
17	88370223122021	KANIKA THAKUR		
18	88370223122022	MADHU DEVI		
19	88370223122023	MANPREET KAUR		
20	88370223122024	MEHAKPREET KAUR		
21	88370223122025	NAINAKSHI		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17071 / HISTORY & APPRECIATION OF ART

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88370223122026	NEEKITA SAINI.		
23	88370223122027	NIKITA RANA		
24	88370223122028	PANKAJ SHARMA		
25	88370223122029	PRATIBHA		
26	88370223122030	RAGHU BIR SINGH		
27	88370223122031	RAHUL KAPOOR		
28	88370223122032	RAHUL KUMAR		
29	88370223122033	RAJEEV KUMAR		
30	88370223122035	SANJEEV KUMAR		
31	88370223122036	SANJEEV KUMAR		
32	88370223122037	SATISH KUMAR		
33	88370223122038	SATWANT SINGH		
34	88370223122039	SHAGUN		
35	88370223122040	SONU DEVI		
36	88370223122041	SUMAN DEVI		
37	88370223122042	SUNIL KUMAR		
38	88370223122043	SUNITA KUMARI		
39	88370223122044	VICKY KUMAR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: First

Subject : 17071 / HISTORY & APPRECIATION OF ART

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17072 / COMP. AWARENESS & GRAPHICS (T)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370223121008	JITENDER SINGH		
2	88370223122006	AJAY SINGH		
3	88370223122007	AKSHIT		
4	88370223122008	ANIKET		
5	88370223122009	ANJALI KUMARI		
6	88370223122010	BALDEV		
7	88370223122011	BANITA SAINI		
8	88370223122012	CHAMAN LAL		
9	88370223122013	DEVINDER KUMAR		
10	88370223122014	DHARMINDER SINGH		
11	88370223122015	DHEERAJ KUMAR		
12	88370223122016	GRUDEV SINGH		
13	88370223122017	GULSHAN KUMAR		
14	88370223122018	GURMEL SINGH		
15	88370223122019	GURPAL SINGH		
16	88370223122020	JASVEER SINGH		
17	88370223122021	KANIKA THAKUR		
18	88370223122022	MADHU DEVI		
19	88370223122023	MANPREET KAUR		
20	88370223122024	MEHAKPREET KAUR		
21	88370223122025	NAINAKSHI		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17072 / COMP. AWARENESS & GRAPHICS (T)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88370223122026	NEEKITA SAINI.		
23	88370223122027	NIKITA RANA		
24	88370223122028	PANKAJ SHARMA		
25	88370223122029	PRATIBHA		
26	88370223122030	RAGHU BIR SINGH		
27	88370223122031	RAHUL KAPOOR		
28	88370223122032	RAHUL KUMAR		
29	88370223122033	RAJEEV KUMAR		
30	88370223122035	SANJEEV KUMAR		
31	88370223122036	SANJEEV KUMAR		
32	88370223122037	SATISH KUMAR		
33	88370223122038	SATWANT SINGH		
34	88370223122039	SHAGUN		
35	88370223122040	SONU DEVI		
36	88370223122041	SUMAN DEVI		
37	88370223122042	SUNIL KUMAR		
38	88370223122043	SUNITA KUMARI		
39	88370223122044	VICKY KUMAR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: First

Subject : 17072 / COMP. AWARENESS & GRAPHICS (T)

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17073 / GEOMETRICAL DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370223121008	JITENDER SINGH		
2	88370223122006	AJAY SINGH		
3	88370223122007	AKSHIT		
4	88370223122008	ANIKET		
5	88370223122009	ANJALI KUMARI		
6	88370223122010	BALDEV		
7	88370223122011	BANITA SAINI		
8	88370223122012	CHAMAN LAL		
9	88370223122013	DEVINDER KUMAR		
10	88370223122014	DHARMINDER SINGH		
11	88370223122015	DHEERAJ KUMAR		
12	88370223122016	GRUDEV SINGH		
13	88370223122017	GULSHAN KUMAR		
14	88370223122018	GURMEL SINGH		
15	88370223122019	GURPAL SINGH		
16	88370223122020	JASVEER SINGH		
17	88370223122021	KANIKA THAKUR		
18	88370223122022	MADHU DEVI		
19	88370223122023	MANPREET KAUR		
20	88370223122024	MEHAKPREET KAUR		
21	88370223122025	NAINAKSHI		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17073 / GEOMETRICAL DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88370223122026	NEEKITA SAINI.		
23	88370223122027	NIKITA RANA		
24	88370223122028	PANKAJ SHARMA		
25	88370223122029	PRATIBHA		
26	88370223122030	RAGHU BIR SINGH		
27	88370223122031	RAHUL KAPOOR		
28	88370223122032	RAHUL KUMAR		
29	88370223122033	RAJEEV KUMAR		
30	88370223122035	SANJEEV KUMAR		
31	88370223122036	SANJEEV KUMAR		
32	88370223122037	SATISH KUMAR		
33	88370223122038	SATWANT SINGH		
34	88370223122039	SHAGUN		
35	88370223122040	SONU DEVI		
36	88370223122041	SUMAN DEVI		
37	88370223122042	SUNIL KUMAR		
38	88370223122043	SUNITA KUMARI		
39	88370223122044	VICKY KUMAR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: First

Subject : 17073 / GEOMETRICAL DRAWING

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17082 / COMP. AWARENESS & GRAPHICS (P)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370223122006	AJAY SINGH		
2	88370223122007	AKSHIT		
3	88370223122008	ANIKET		
4	88370223122009	ANJALI KUMARI		
5	88370223122010	BALDEV		
6	88370223122011	BANITA SAINI		
7	88370223122012	CHAMAN LAL		
8	88370223122013	DEVINDER KUMAR		
9	88370223122014	DHARMINDER SINGH		
10	88370223122015	DHEERAJ KUMAR		
11	88370223122016	GRUDEV SINGH		
12	88370223122017	GULSHAN KUMAR		
13	88370223122018	GURMEL SINGH		
14	88370223122019	GURPAL SINGH		
15	88370223122020	JASVEER SINGH		
16	88370223122021	KANIKA THAKUR		
17	88370223122022	MADHU DEVI		
18	88370223122023	MANPREET KAUR		
19	88370223122024	MEHAKPREET KAUR		
20	88370223122025	NAINAKSHI		
21	88370223122026	NEEKITA SAINI.		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17082 / COMP. AWARENESS & GRAPHICS (P)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88370223122027	NIKITA RANA		
23	88370223122028	PANKAJ SHARMA		
24	88370223122029	PRATIBHA		
25	88370223122030	RAGHU BIR SINGH		
26	88370223122031	RAHUL KAPOOR		
27	88370223122032	RAHUL KUMAR		
28	88370223122033	RAJEEV KUMAR		
29	88370223122035	SANJEEV KUMAR		
30	88370223122036	SANJEEV KUMAR		
31	88370223122037	SATISH KUMAR		
32	88370223122038	SATWANT SINGH		
33	88370223122039	SHAGUN		
34	88370223122040	SONU DEVI		
35	88370223122041	SUMAN DEVI		
36	88370223122042	SUNIL KUMAR		
37	88370223122043	SUNITA KUMARI		
38	88370223122044	VICKY KUMAR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: First

Subject : 17082 / COMP. AWARENESS & GRAPHICS (P)

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70051 / PAINTING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370223121003	BALJEET KAUR		
2	88370223121004	DARSHAN SINGH		
3	88370223121005	GURDEEP SINGH		
4	88370223121006	HEM LATA		
5	88370223121007	JARNAIL SINGH		
6	88370223121008	JITENDER SINGH		
7	88370223121009	NEHA SAINI		
8	88370223121010	NEHA SHARMA		
9	88370223121014	REETA DEVI		
10	88370223121015	SAMRITI SHARMA		
11	88370223121016	SAVITA BHATIA		
12	88370223121017	SHILPA KUMARI		
13	88370223121018	SUMAN LATA		
14	88370223121019	SUNIT KUMAR		
15	88370223121020	SURINDER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: Second

Subject : 70051 / PAINTING

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70055 / CRAFT (T)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370223121003	BALJEET KAUR		
2	88370223121004	DARSHAN SINGH		
3	88370223121005	GURDEEP SINGH		
4	88370223121006	HEM LATA		
5	88370223121007	JARNAIL SINGH		
6	88370223121008	JITENDER SINGH		
7	88370223121009	NEHA SAINI		
8	88370223121010	NEHA SHARMA		
9	88370223121014	REETA DEVI		
10	88370223121015	SAMRITI SHARMA		
11	88370223121016	SAVITA BHATIA		
12	88370223121017	SHILPA KUMARI		
13	88370223121018	SUMAN LATA		
14	88370223121019	SUNIT KUMAR		
15	88370223121020	SURINDER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: Second

Subject : 70055 / CRAFT (T)

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70056 / CRAFT (P)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370223121003	BALJEET KAUR		
2	88370223121004	DARSHAN SINGH		
3	88370223121005	GURDEEP SINGH		
4	88370223121006	HEM LATA		
5	88370223121007	JARNAIL SINGH		
6	88370223121008	JITENDER SINGH		
7	88370223121009	NEHA SAINI		
8	88370223121010	NEHA SHARMA		
9	88370223121014	REETA DEVI		
10	88370223121015	SAMRITI SHARMA		
11	88370223121016	SAVITA BHATIA		
12	88370223121017	SHILPA KUMARI		
13	88370223121018	SUMAN LATA		
14	88370223121019	SUNIT KUMAR		
15	88370223121020	SURINDER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: Second

Subject : 70056 / CRAFT (P)

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70070 / EDUCATIONAL PSYCHOLOGY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370223121003	BALJEET KAUR		
2	88370223121004	DARSHAN SINGH		
3	88370223121005	GURDEEP SINGH		
4	88370223121006	HEM LATA		
5	88370223121007	JARNAIL SINGH		
6	88370223121008	JITENDER SINGH		
7	88370223121009	NEHA SAINI		
8	88370223121010	NEHA SHARMA		
9	88370223121014	REETA DEVI		
10	88370223121015	SAMRITI SHARMA		
11	88370223121016	SAVITA BHATIA		
12	88370223121017	SHILPA KUMARI		
13	88370223121018	SUMAN LATA		
14	88370223121019	SUNIT KUMAR		
15	88370223121020	SURINDER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: Second

Subject : 70070 / EDUCATIONAL PSYCHOLOGY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70071 / HISTORY & APPRECIATION OF ART

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370223120014	BALJINDER KAUR		
2	88370223120016	SURINDER KUMAR		
3	88370223121003	BALJEET KAUR		
4	88370223121004	DARSHAN SINGH		
5	88370223121005	GURDEEP SINGH		
6	88370223121006	HEM LATA		
7	88370223121007	JARNAIL SINGH		
8	88370223121008	JITENDER SINGH		
9	88370223121009	NEHA SAINI		
10	88370223121010	NEHA SHARMA		
11	88370223121014	REETA DEVI		
12	88370223121015	SAMRITI SHARMA		
13	88370223121016	SAVITA BHATIA		
14	88370223121017	SHILPA KUMARI		
15	88370223121018	SUMAN LATA		
16	88370223121019	SUNIT KUMAR		
17	88370223121020	SURINDER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: Second

Subject : 70071 / HISTORY & APPRECIATION OF ART

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70072 / COMMERCIAL ART

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370223121003	BALJEET KAUR		
2	88370223121004	DARSHAN SINGH		
3	88370223121005	GURDEEP SINGH		
4	88370223121006	HEM LATA		
5	88370223121007	JARNAIL SINGH		
6	88370223121008	JITENDER SINGH		
7	88370223121009	NEHA SAINI		
8	88370223121010	NEHA SHARMA		
9	88370223121014	REETA DEVI		
10	88370223121015	SAMRITI SHARMA		
11	88370223121016	SAVITA BHATIA		
12	88370223121017	SHILPA KUMARI		
13	88370223121018	SUMAN LATA		
14	88370223121019	SUNIT KUMAR		
15	88370223121020	SURINDER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: Second

Subject : 70072 / COMMERCIAL ART

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70073 / SCALE & PERSPECTIVE DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370223121003	BALJEET KAUR		
2	88370223121004	DARSHAN SINGH		
3	88370223121005	GURDEEP SINGH		
4	88370223121006	HEM LATA		
5	88370223121007	JARNAIL SINGH		
6	88370223121008	JITENDER SINGH		
7	88370223121009	NEHA SAINI		
8	88370223121010	NEHA SHARMA		
9	88370223121014	REETA DEVI		
10	88370223121015	SAMRITI SHARMA		
11	88370223121016	SAVITA BHATIA		
12	88370223121017	SHILPA KUMARI		
13	88370223121018	SUMAN LATA		
14	88370223121019	SUNIT KUMAR		
15	88370223121020	SURINDER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: Second

Subject : 70073 / SCALE & PERSPECTIVE DRAWING

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70074 / TEACHING OF ART & CRAFT (P)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370223121003	BALJEET KAUR		
2	88370223121004	DARSHAN SINGH		
3	88370223121005	GURDEEP SINGH		
4	88370223121006	HEM LATA		
5	88370223121007	JARNAIL SINGH		
6	88370223121008	JITENDER SINGH		
7	88370223121009	NEHA SAINI		
8	88370223121010	NEHA SHARMA		
9	88370223121014	REETA DEVI		
10	88370223121015	SAMRITI SHARMA		
11	88370223121016	SAVITA BHATIA		
12	88370223121017	SHILPA KUMARI		
13	88370223121018	SUMAN LATA		
14	88370223121019	SUNIT KUMAR		
15	88370223121020	SURINDER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: Second

Subject : 70074 / TEACHING OF ART & CRAFT (P)

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70075 / PROJECT

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370223121003	BALJEET KAUR		
2	88370223121004	DARSHAN SINGH		
3	88370223121005	GURDEEP SINGH		
4	88370223121006	HEM LATA		
5	88370223121007	JARNAIL SINGH		
6	88370223121008	JITENDER SINGH		
7	88370223121009	NEHA SAINI		
8	88370223121010	NEHA SHARMA		
9	88370223121014	REETA DEVI		
10	88370223121015	SAMRITI SHARMA		
11	88370223121016	SAVITA BHATIA		
12	88370223121017	SHILPA KUMARI		
13	88370223121018	SUMAN LATA		
14	88370223121019	SUNIT KUMAR		
15	88370223121020	SURINDER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: Second

Subject : 70075 / PROJECT

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70082 / COMPUTER AWARENESS & GRAPHICS (P)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370223121003	BALJEET KAUR		
2	88370223121004	DARSHAN SINGH		
3	88370223121005	GURDEEP SINGH		
4	88370223121006	HEM LATA		
5	88370223121007	JARNAIL SINGH		
6	88370223121008	JITENDER SINGH		
7	88370223121009	NEHA SAINI		
8	88370223121010	NEHA SHARMA		
9	88370223121014	REETA DEVI		
10	88370223121015	SAMRITI SHARMA		
11	88370223121016	SAVITA BHATIA		
12	88370223121017	SHILPA KUMARI		
13	88370223121018	SUMAN LATA		
14	88370223121019	SUNIT KUMAR		
15	88370223121020	SURINDER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: Second

Subject : 70082 / COMPUTER AWARENESS & GRAPHICS (P)

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 671 / SURFACE ORNAMENTATION TECHNIQUES ((EMBRIODERY) Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88249120422021	ANCHAL		
2	88249120422023	DILPREET KAUR		
3	88249120422025	JASVEER KAUR		
4	88249120422026	JYOTI DEVI		
5	88249120422028	MONIKA BANGA		
6	88249120422029	NEELAM		
7	88249120422030	NEELAM KUMARI		
8	88249120422031	POOJA		
9	88249120422032	RAJNI		
10	88249120422033	RAJNI DEVI		
11	88249120422034	RAJNI DEVI		
12	88249120422035	REETU DEVI		
13	88249120422036	SALONI		
14	88249120422037	SAROJ KUMARI		
15	88249120422038	SHIVANI ADHIKARI		
16	88249120422039	SIMRAN		
17	88249120422040	SUPRIYA DEVI		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 671 / SURFACE ORNAMENTATION TECHNIQUES ((EMBRIODERY) Class: First

Subject : 44431 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 671 / SURFACE ORNAMENTATION TECHNIQUES ((EMBRIODERY) Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88249120422021	ANCHAL		
2	88249120422023	DILPREET KAUR		
3	88249120422025	JASVEER KAUR		
4	88249120422026	JYOTI DEVI		
5	88249120422028	MONIKA BANGA		
6	88249120422029	NEELAM		
7	88249120422030	NEELAM KUMARI		
8	88249120422031	POOJA		
9	88249120422032	RAJNI		
10	88249120422033	RAJNI DEVI		
11	88249120422034	RAJNI DEVI		
12	88249120422035	REETU DEVI		
13	88249120422036	SALONI		
14	88249120422037	SAROJ KUMARI		
15	88249120422038	SHIVANI ADHIKARI		
16	88249120422039	SIMRAN		
17	88249120422040	SUPRIYA DEVI		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 671 / SURFACE ORNAMENTATION TECHNIQUES ((EMBRIODERY) Class: First

Subject : 44434 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 671 / SURFACE ORNAMENTATION TECHNIQUES ((EMBRIODERY) Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88249120422021	ANCHAL		
2	88249120422023	DILPREET KAUR		
3	88249120422025	JASVEER KAUR		
4	88249120422026	JYOTI DEVI		
5	88249120422028	MONIKA BANGA		
6	88249120422029	NEELAM		
7	88249120422030	NEELAM KUMARI		
8	88249120422031	POOJA		
9	88249120422032	RAJNI		
10	88249120422033	RAJNI DEVI		
11	88249120422034	RAJNI DEVI		
12	88249120422035	REETU DEVI		
13	88249120422036	SALONI		
14	88249120422037	SAROJ KUMARI		
15	88249120422038	SHIVANI ADHIKARI		
16	88249120422039	SIMRAN		
17	88249120422040	SUPRIYA DEVI		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1335 / INDUSTRIAL TRAINING INST. (W) , ANANDPUR SAHIB

Course : 671 / SURFACE ORNAMENTATION TECHNIQUES ((EMBRIODERY) Class: First

Subject : 44435 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 132 / ELECTRICIAN

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231231121052	Goldy Singh		
2	88231231121055	Gurpreet Singh		
3	88231231121061	Kuldeep Singh		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 132 / ELECTRICIAN

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231231121052	Goldy Singh		
2	88231231121055	Gurpreet Singh		
3	88231231121061	Kuldeep Singh		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44423 / ENGINEERING DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231231119044	AMANDEEP SINGH		
2	88231231119045	DAVINDER SINGH		
3	88231231119046	GURGAGAN SINGH		
4	88231231119047	GURPREET SINGH		
5	88231231119048	GURTEJ SINGH		
6	88231231119049	HARDEEP SINGH		
7	88231231119051	JAGSEER SINGH		
8	88231231119052	JASHANPREET SINGH		
9	88231231119059	THAKUR VINOD		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44441 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231231121051	Gaggu Singh		
2	88231231121052	Goldy Singh		
3	88231231121053	Gurdeep Singh		
4	88231231121054	Gurpreet Singh		
5	88231231121055	Gurpreet Singh		
6	88231231121056	Harkesh Singh		
7	88231231121057	Harpreet Singh		
8	88231231121058	Harpreet Singh		
9	88231231121059	Harwinder Singh		
10	88231231121060	Jaspreet Singh		
11	88231231121061	Kuldeep Singh		
12	88231231121062	Lovepreet Singh		
13	88231231121063	Lovepreet Singh		
14	88231231121064	Lovepreet Singh		
15	88231231121065	Manpreet Singh		
16	88231231121066	Naginder Singh		
17	88231231121067	Sawarn Singh		
18	88231231121068	Sharandeep Singh		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44441 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44444 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231231121051	Gaggu Singh		
2	88231231121052	Goldy Singh		
3	88231231121053	Gurdeep Singh		
4	88231231121054	Gurpreet Singh		
5	88231231121055	Gurpreet Singh		
6	88231231121056	Harkesh Singh		
7	88231231121057	Harpreet Singh		
8	88231231121058	Harpreet Singh		
9	88231231121059	Harwinder Singh		
10	88231231121060	Jaspreet Singh		
11	88231231121061	Kuldeep Singh		
12	88231231121062	Lovepreet Singh		
13	88231231121063	Lovepreet Singh		
14	88231231121064	Lovepreet Singh		
15	88231231121065	Manpreet Singh		
16	88231231121066	Naginder Singh		
17	88231231121067	Sawarn Singh		
18	88231231121068	Sharandeep Singh		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44444 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44445 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231231121051	Gaggu Singh		
2	88231231121052	Goldy Singh		
3	88231231121053	Gurdeep Singh		
4	88231231121054	Gurpreet Singh		
5	88231231121055	Gurpreet Singh		
6	88231231121056	Harkesh Singh		
7	88231231121057	Harpreet Singh		
8	88231231121058	Harpreet Singh		
9	88231231121059	Harwinder Singh		
10	88231231121060	Jaspreet Singh		
11	88231231121061	Kuldeep Singh		
12	88231231121062	Lovepreet Singh		
13	88231231121063	Lovepreet Singh		
14	88231231121064	Lovepreet Singh		
15	88231231121065	Manpreet Singh		
16	88231231121066	Naginder Singh		
17	88231231121067	Sawarn Singh		
18	88231231121068	Sharandeep Singh		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44445 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88242131122001	AMANPREET KAUR		
2	88242131122002	AMRITPAL SINGH		
3	88242131122003	ARSHDEEP SINGH		
4	88242131122004	BUTA SINGH		
5	88242131122005	DEEPAK KUMAR		
6	88242131122006	GURBINDER SINGH		
7	88242131122007	GURDEEP SINGH		
8	88242131122008	GURPREET SINGH		
9	88242131122009	HARPREET SINGH		
10	88242131122010	HARSHPREET SINGH		
11	88242131122011	HARWINDER SINGH		
12	88242131122012	IQBAL KHAN		
13	88242131122013	JAIDEEP SINGH		
14	88242131122014	JOBANPREET SINGH		
15	88242131122017	MANJIT KUMAR		
16	88242131122018	MANPREET SINGH		
17	88242131122019	PARDEEP SINGH		
18	88242131122020	SATWINDER SINGH		
19	88242131122022	SUKHMAN SINGH		
20	88242131122023	SULTAN KHAN		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: First

Subject : 44431 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88242131122001	AMANPREET KAUR		
2	88242131122002	AMRITPAL SINGH		
3	88242131122003	ARSHDEEP SINGH		
4	88242131122004	BUTA SINGH		
5	88242131122005	DEEPAK KUMAR		
6	88242131122006	GURBINDER SINGH		
7	88242131122007	GURDEEP SINGH		
8	88242131122008	GURPREET SINGH		
9	88242131122009	HARPREET SINGH		
10	88242131122010	HARSHPREET SINGH		
11	88242131122011	HARWINDER SINGH		
12	88242131122012	IQBAL KHAN		
13	88242131122013	JAIDEEP SINGH		
14	88242131122014	JOBANPREET SINGH		
15	88242131122017	MANJIT KUMAR		
16	88242131122018	MANPREET SINGH		
17	88242131122019	PARDEEP SINGH		
18	88242131122020	SATWINDER SINGH		
19	88242131122022	SUKHMAN SINGH		
20	88242131122023	SULTAN KHAN		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88242131122001	AMANPREET KAUR		
2	88242131122002	AMRITPAL SINGH		
3	88242131122003	ARSHDEEP SINGH		
4	88242131122004	BUTA SINGH		
5	88242131122005	DEEPAK KUMAR		
6	88242131122006	GURBINDER SINGH		
7	88242131122007	GURDEEP SINGH		
8	88242131122008	GURPREET SINGH		
9	88242131122009	HARPREET SINGH		
10	88242131122010	HARSHPREET SINGH		
11	88242131122011	HARWINDER SINGH		
12	88242131122012	IQBAL KHAN		
13	88242131122013	JAIDEEP SINGH		
14	88242131122014	JOBANPREET SINGH		
15	88242131122017	MANJIT KUMAR		
16	88242131122018	MANPREET SINGH		
17	88242131122019	PARDEEP SINGH		
18	88242131122020	SATWINDER SINGH		
19	88242131122022	SUKHMAN SINGH		
20	88242131122023	SULTAN KHAN		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: First

Subject : 44435 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 370 / ART & CRAFTS

Class: First

Subject : 17055 / CRAFT (T)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370136118014	KARAMVEER KAUR		
2	88370136119016	MANVEER RANI		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 370 / ART & CRAFTS

Class: First

Subject : 17073 / GEOMETRICAL DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370136119006	HARDEEP KAUR		
2	88370136119028	VEERPAL KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 370 / ART & CRAFTS

Class: Second

Subject : 70051 / PAINTING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370136119001	AMANDEEP KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 370 / ART & CRAFTS

Class: Second

Subject : 70056 / CRAFT (P)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370136119001	AMANDEEP KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 370 / ART & CRAFTS

Class: Second

Subject : 70070 / EDUCATIONAL PSYCHOLOGY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370136119016	MANVEER RANI		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 370 / ART & CRAFTS

Class: Second

Subject : 70071 / HISTORY & APPRECIATION OF ART

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370136117016	JAGTAR SINGH		
2	88370136117032	RAMANDEEP KAUR		
3	88370136117040	LASHMAN SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 370 / ART & CRAFTS

Class: Second

Subject : 70072 / COMMERCIAL ART

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370136119001	AMANDEEP KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 370 / ART & CRAFTS

Class: Second

Subject : 70073 / SCALE & PERSPECTIVE DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370136117032	RAMANDEEP KAUR		
2	88370136117040	LASHMAN SINGH		
3	88370136118013	JASPREET SINGH		
4	88370136118019	MANDEEP SINGH		
5	88370136118025	PARDEEP KAUR		
6	88370136118027	RAMANDEEP KAUR		
7	88370136119001	AMANDEEP KAUR		
8	88370136119006	HARDEEP KAUR		
9	88370136119016	MANVEER RANI		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 370 / ART & CRAFTS

Class: Second

Subject : 70075 / PROJECT

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370136119001	AMANDEEP KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: First

Subject : 17051 / PAINTING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370236120027	RAMANDEEP KAUR		
2	88370236121012	JASPREET SINGH		
3	88370236121016	KULDEEP SINGH		
4	88370236121035	VIRPAL KAUR		
5	88370236122001	JASHANPREET SINGH		
6	88370236122002	PARDEEP KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17055 / CRAFT (T)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370236120007	GURPREET KAUR		
2	88370236120009	HARPREET KAUR		
3	88370236120015	KOSHAKI MITTAL		
4	88370236120024	PRIYA		
5	88370236121003	AMARJEET KAUR		
6	88370236121008	HARPREET KAUR		
7	88370236121010	HARPREET SINGH		
8	88370236121012	JASPREET SINGH		
9	88370236121016	KULDEEP SINGH		
10	88370236121033	TARANDEEP KAUR		
11	88370236121035	VIRPAL KAUR		
12	88370236122001	JASHANPREET SINGH		
13	88370236122002	PARDEEP KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17055 / CRAFT (T)

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: First

Subject : 17059 / DESIGN

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370236120009	HARPREET KAUR		
2	88370236121012	JASPREET SINGH		
3	88370236121016	KULDEEP SINGH		
4	88370236121035	VIRPAL KAUR		
5	88370236122001	JASHANPREET SINGH		
6	88370236122002	PARDEEP KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17060 / STILL LIFE

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370236120009	HARPREET KAUR		
2	88370236121003	AMARJEET KAUR		
3	88370236121004	GURJEET SINGH		
4	88370236121005	GURPREET SINGH		
5	88370236121009	HARPREET KAUR		
6	88370236121010	HARPREET SINGH		
7	88370236121012	JASPREET SINGH		
8	88370236121016	KULDEEP SINGH		
9	88370236121033	TARANDEEP KAUR		
10	88370236121034	VEERPAL KAUR		
11	88370236121035	VIRPAL KAUR		
12	88370236122001	JASHANPREET SINGH		
13	88370236122002	PARDEEP KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: First

Subject : 17060 / STILL LIFE

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: First

Subject : 17065 / CRAFT (P)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370236120027	RAMANDEEP KAUR		
2	88370236121012	JASPREET SINGH		
3	88370236121016	KULDEEP SINGH		
4	88370236121035	VIRPAL KAUR		
5	88370236122001	JASHANPREET SINGH		
6	88370236122002	PARDEEP KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17070 / PRINCIPLES OF EDUCATION

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370236120007	GURPREET KAUR		
2	88370236120015	KOSHAKI MITTAL		
3	88370236120024	PRIYA		
4	88370236121008	HARPREET KAUR		
5	88370236121010	HARPREET SINGH		
6	88370236121012	JASPREET SINGH		
7	88370236121016	KULDEEP SINGH		
8	88370236121033	TARANDEEP KAUR		
9	88370236121035	VIRPAL KAUR		
10	88370236122001	JASHANPREET SINGH		
11	88370236122002	PARDEEP KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: First

Subject : 17070 / PRINCIPLES OF EDUCATION

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17071 / HISTORY & APPRECIATION OF ART

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370236121012	JASPREET SINGH		
2	88370236121016	KULDEEP SINGH		
3	88370236121033	TARANDEEP KAUR		
4	88370236121035	VIRPAL KAUR		
5	88370236122001	JASHANPREET SINGH		
6	88370236122002	PARDEEP KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17072 / COMP. AWARENESS & GRAPHICS (T)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370236121012	JASPREET SINGH		
2	88370236121014	KARAMJIT KAUR		
3	88370236121016	KULDEEP SINGH		
4	88370236121033	TARANDEEP KAUR		
5	88370236121035	VIRPAL KAUR		
6	88370236122001	JASHANPREET SINGH		
7	88370236122002	PARDEEP KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17073 / GEOMETRICAL DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370236120002	ANITA KUMARI		
2	88370236120003	ARSHPREET KAUR		
3	88370236120007	GURPREET KAUR		
4	88370236120009	HARPREET KAUR		
5	88370236120012	JODHA SINGH		
6	88370236120015	KOSHAKI MITTAL		
7	88370236120024	PRIYA		
8	88370236120027	RAMANDEEP KAUR		
9	88370236120031	SARBI GOYAL		
10	88370236120033	SARBJEET KAUR		
11	88370236121002	AMANDEEP SINGH		
12	88370236121003	AMARJEET KAUR		
13	88370236121004	GURJEET SINGH		
14	88370236121005	GURPREET SINGH		
15	88370236121008	HARPREET KAUR		
16	88370236121009	HARPREET KAUR		
17	88370236121010	HARPREET SINGH		
18	88370236121012	JASPREET SINGH		
19	88370236121014	KARAMJIT KAUR		
20	88370236121016	KULDEEP SINGH		
21	88370236121024	PARMINDER SINGH		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17073 / GEOMETRICAL DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88370236121026	RAMANDEEP KAUR		
23	88370236121027	RAMNIK KAUR		
24	88370236121029	SIMARJEET KAUR		
25	88370236121031	SUKHVIR KAUR		
26	88370236121033	TARANDEEP KAUR		
27	88370236121034	VEERPAL KAUR		
28	88370236121035	VIRPAL KAUR		
29	88370236122001	JASHANPREET SINGH		
30	88370236122002	PARDEEP KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: First

Subject : 17082 / COMP. AWARENESS & GRAPHICS (P)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370236120009	HARPREET KAUR		
2	88370236120027	RAMANDEEP KAUR		
3	88370236121012	JASPREET SINGH		
4	88370236121016	KULDEEP SINGH		
5	88370236122001	JASHANPREET SINGH		
6	88370236122002	PARDEEP KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70051 / PAINTING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370236120009	HARPREET KAUR		
2	88370236121001	AMANDEEP KAUR		
3	88370236121002	AMANDEEP SINGH		
4	88370236121003	AMARJEET KAUR		
5	88370236121004	GURJEET SINGH		
6	88370236121005	GURPREET SINGH		
7	88370236121008	HARPREET KAUR		
8	88370236121009	HARPREET KAUR		
9	88370236121010	HARPREET SINGH		
10	88370236121014	KARAMJIT KAUR		
11	88370236121018	LOKESH KUMAR		
12	88370236121021	MONA SINGLA		
13	88370236121023	PARMINDER KAUR		
14	88370236121024	PARMINDER SINGH		
15	88370236121026	RAMANDEEP KAUR		
16	88370236121027	RAMNIK KAUR		
17	88370236121029	SIMARJEET KAUR		
18	88370236121031	SUKHVIR KAUR		
19	88370236121033	TARANDEEP KAUR		
20	88370236121034	VEERPAL KAUR		
21	88370236121035	VIRPAL KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70051 / PAINTING

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70055 / CRAFT (T)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370236120007	GURPREET KAUR		
2	88370236120009	HARPREET KAUR		
3	88370236121001	AMANDEEP KAUR		
4	88370236121002	AMANDEEP SINGH		
5	88370236121003	AMARJEET KAUR		
6	88370236121004	GURJEET SINGH		
7	88370236121005	GURPREET SINGH		
8	88370236121008	HARPREET KAUR		
9	88370236121009	HARPREET KAUR		
10	88370236121010	HARPREET SINGH		
11	88370236121014	KARAMJIT KAUR		
12	88370236121018	LOKESH KUMAR		
13	88370236121021	MONA SINGLA		
14	88370236121023	PARMINDER KAUR		
15	88370236121024	PARMINDER SINGH		
16	88370236121026	RAMANDEEP KAUR		
17	88370236121027	RAMNIK KAUR		
18	88370236121029	SIMARJEET KAUR		
19	88370236121031	SUKHVIR KAUR		
20	88370236121033	TARANDEEP KAUR		
21	88370236121034	VEERPAL KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70055 / CRAFT (T)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88370236121035	VIRPAL KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70056 / CRAFT (P)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370236120009	HARPREET KAUR		
2	88370236120015	KOSHAKI MITTAL		
3	88370236121001	AMANDEEP KAUR		
4	88370236121002	AMANDEEP SINGH		
5	88370236121003	AMARJEET KAUR		
6	88370236121004	GURJEET SINGH		
7	88370236121005	GURPREET SINGH		
8	88370236121008	HARPREET KAUR		
9	88370236121009	HARPREET KAUR		
10	88370236121010	HARPREET SINGH		
11	88370236121014	KARAMJIT KAUR		
12	88370236121018	LOKESH KUMAR		
13	88370236121021	MONA SINGLA		
14	88370236121023	PARMINDER KAUR		
15	88370236121024	PARMINDER SINGH		
16	88370236121026	RAMANDEEP KAUR		
17	88370236121027	RAMNIK KAUR		
18	88370236121029	SIMARJEET KAUR		
19	88370236121031	SUKHVIR KAUR		
20	88370236121033	TARANDEEP KAUR		
21	88370236121034	VEERPAL KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70056 / CRAFT (P)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88370236121035	VIRPAL KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70070 / EDUCATIONAL PSYCHOLOGY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370236120007	GURPREET KAUR		
2	88370236120009	HARPREET KAUR		
3	88370236120012	JODHA SINGH		
4	88370236120014	KAMALJEET KAUR		
5	88370236120015	KOSHAKI MITTAL		
6	88370236120024	PRIYA		
7	88370236120033	SARBJEET KAUR		
8	88370236121001	AMANDEEP KAUR		
9	88370236121002	AMANDEEP SINGH		
10	88370236121003	AMARJEET KAUR		
11	88370236121004	GURJEET SINGH		
12	88370236121005	GURPREET SINGH		
13	88370236121008	HARPREET KAUR		
14	88370236121009	HARPREET KAUR		
15	88370236121010	HARPREET SINGH		
16	88370236121014	KARAMJIT KAUR		
17	88370236121018	LOKESH KUMAR		
18	88370236121021	MONA SINGLA		
19	88370236121023	PARMINDER KAUR		
20	88370236121024	PARMINDER SINGH		
21	88370236121026	RAMANDEEP KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70070 / EDUCATIONAL PSYCHOLOGY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88370236121027	RAMNIK KAUR		
23	88370236121029	SIMARJEET KAUR		
24	88370236121031	SUKHVIR KAUR		
25	88370236121033	TARANDEEP KAUR		
26	88370236121034	VEERPAL KAUR		
27	88370236121035	VIRPAL KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70071 / HISTORY & APPRECIATION OF ART

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370236120001	AKANKSHA		
2	88370236120009	HARPREET KAUR		
3	88370236120012	JODHA SINGH		
4	88370236120014	KAMALJEET KAUR		
5	88370236120015	KOSHAKI MITTAL		
6	88370236120024	PRIYA		
7	88370236120031	SARBI GOYAL		
8	88370236120033	SARBJEET KAUR		
9	88370236121001	AMANDEEP KAUR		
10	88370236121002	AMANDEEP SINGH		
11	88370236121003	AMARJEET KAUR		
12	88370236121004	GURJEET SINGH		
13	88370236121005	GURPREET SINGH		
14	88370236121008	HARPREET KAUR		
15	88370236121009	HARPREET KAUR		
16	88370236121010	HARPREET SINGH		
17	88370236121014	KARAMJIT KAUR		
18	88370236121018	LOKESH KUMAR		
19	88370236121021	MONA SINGLA		
20	88370236121023	PARMINDER KAUR		
21	88370236121024	PARMINDER SINGH		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70071 / HISTORY & APPRECIATION OF ART

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88370236121026	RAMANDEEP KAUR		
23	88370236121027	RAMNIK KAUR		
24	88370236121029	SIMARJEET KAUR		
25	88370236121031	SUKHVIR KAUR		
26	88370236121033	TARANDEEP KAUR		
27	88370236121034	VEERPAL KAUR		
28	88370236121035	VIRPAL KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70072 / COMMERCIAL ART

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370236120009	HARPREET KAUR		
2	88370236121001	AMANDEEP KAUR		
3	88370236121002	AMANDEEP SINGH		
4	88370236121003	AMARJEET KAUR		
5	88370236121004	GURJEET SINGH		
6	88370236121005	GURPREET SINGH		
7	88370236121008	HARPREET KAUR		
8	88370236121009	HARPREET KAUR		
9	88370236121010	HARPREET SINGH		
10	88370236121014	KARAMJIT KAUR		
11	88370236121018	LOKESH KUMAR		
12	88370236121021	MONA SINGLA		
13	88370236121023	PARMINDER KAUR		
14	88370236121024	PARMINDER SINGH		
15	88370236121026	RAMANDEEP KAUR		
16	88370236121027	RAMNIK KAUR		
17	88370236121029	SIMARJEET KAUR		
18	88370236121031	SUKHVIR KAUR		
19	88370236121033	TARANDEEP KAUR		
20	88370236121034	VEERPAL KAUR		
21	88370236121035	VIRPAL KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70072 / COMMERCIAL ART

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70073 / SCALE & PERSPECTIVE DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370236120007	GURPREET KAUR		
2	88370236120009	HARPREET KAUR		
3	88370236120015	KOSHAKI MITTAL		
4	88370236121001	AMANDEEP KAUR		
5	88370236121002	AMANDEEP SINGH		
6	88370236121003	AMARJEET KAUR		
7	88370236121004	GURJEET SINGH		
8	88370236121005	GURPREET SINGH		
9	88370236121008	HARPREET KAUR		
10	88370236121009	HARPREET KAUR		
11	88370236121010	HARPREET SINGH		
12	88370236121014	KARAMJIT KAUR		
13	88370236121018	LOKESH KUMAR		
14	88370236121021	MONA SINGLA		
15	88370236121023	PARMINDER KAUR		
16	88370236121024	PARMINDER SINGH		
17	88370236121026	RAMANDEEP KAUR		
18	88370236121027	RAMNIK KAUR		
19	88370236121029	SIMARJEET KAUR		
20	88370236121031	SUKHVIR KAUR		
21	88370236121033	TARANDEEP KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70073 / SCALE & PERSPECTIVE DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88370236121034	VEERPAL KAUR		
23	88370236121035	VIRPAL KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70074 / TEACHING OF ART & CRAFT (P)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370236120015	KOSHAKI MITTAL		
2	88370236121001	AMANDEEP KAUR		
3	88370236121002	AMANDEEP SINGH		
4	88370236121003	AMARJEET KAUR		
5	88370236121004	GURJEET SINGH		
6	88370236121005	GURPREET SINGH		
7	88370236121008	HARPREET KAUR		
8	88370236121009	HARPREET KAUR		
9	88370236121010	HARPREET SINGH		
10	88370236121014	KARAMJIT KAUR		
11	88370236121018	LOKESH KUMAR		
12	88370236121021	MONA SINGLA		
13	88370236121023	PARMINDER KAUR		
14	88370236121024	PARMINDER SINGH		
15	88370236121026	RAMANDEEP KAUR		
16	88370236121027	RAMNIK KAUR		
17	88370236121029	SIMARJEET KAUR		
18	88370236121031	SUKHVIR KAUR		
19	88370236121033	TARANDEEP KAUR		
20	88370236121034	VEERPAL KAUR		
21	88370236121035	VIRPAL KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70074 / TEACHING OF ART & CRAFT (P)

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70075 / PROJECT

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370236120009	HARPREET KAUR		
2	88370236121001	AMANDEEP KAUR		
3	88370236121002	AMANDEEP SINGH		
4	88370236121003	AMARJEET KAUR		
5	88370236121004	GURJEET SINGH		
6	88370236121005	GURPREET SINGH		
7	88370236121008	HARPREET KAUR		
8	88370236121009	HARPREET KAUR		
9	88370236121010	HARPREET SINGH		
10	88370236121014	KARAMJIT KAUR		
11	88370236121018	LOKESH KUMAR		
12	88370236121021	MONA SINGLA		
13	88370236121023	PARMINDER KAUR		
14	88370236121024	PARMINDER SINGH		
15	88370236121026	RAMANDEEP KAUR		
16	88370236121027	RAMNIK KAUR		
17	88370236121029	SIMARJEET KAUR		
18	88370236121031	SUKHVIR KAUR		
19	88370236121033	TARANDEEP KAUR		
20	88370236121034	VEERPAL KAUR		
21	88370236121035	VIRPAL KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70075 / PROJECT

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70082 / COMPUTER AWARENESS & GRAPHICS (P)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370236120009	HARPREET KAUR		
2	88370236121001	AMANDEEP KAUR		
3	88370236121002	AMANDEEP SINGH		
4	88370236121003	AMARJEET KAUR		
5	88370236121004	GURJEET SINGH		
6	88370236121005	GURPREET SINGH		
7	88370236121008	HARPREET KAUR		
8	88370236121009	HARPREET KAUR		
9	88370236121010	HARPREET SINGH		
10	88370236121014	KARAMJIT KAUR		
11	88370236121018	LOKESH KUMAR		
12	88370236121021	MONA SINGLA		
13	88370236121023	PARMINDER KAUR		
14	88370236121024	PARMINDER SINGH		
15	88370236121026	RAMANDEEP KAUR		
16	88370236121027	RAMNIK KAUR		
17	88370236121029	SIMARJEET KAUR		
18	88370236121031	SUKHVIR KAUR		
19	88370236121033	TARANDEEP KAUR		
20	88370236121034	VEERPAL KAUR		
21	88370236121035	VIRPAL KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: Second

Subject : 70082 / COMPUTER AWARENESS & GRAPHICS (P)

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 671 / SURFACE ORNAMENTATION TECHNIQUES ((EMBRIODERY) Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88249131222002	AMANDEEP KAUR		
2	88249131222003	AMRITPAL KAUR		
3	88249131222004	ASHA RANI		
4	88249131222005	BALJINDER KAUR		
5	88249131222006	GURPREET KAUR		
6	88249131222008	HARPREET KAUR		
7	88249131222009	HARPREET KAUR		
8	88249131222011	JASPREET KAUR		
9	88249131222013	KULDEEP KAUR		
10	88249131222014	KULWINDER KAUR		
11	88249131222015	MEENA KAUR		
12	88249131222016	MOHANPREET KAUR		
13	88249131222017	PARVEEN KAUR		
14	88249131222018	POOJA KAUR		
15	88249131222019	RAMANPREET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 671 / SURFACE ORNAMENTATION TECHNIQUES ((EMBRIODERY) Class: First

Subject : 44431 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 671 / SURFACE ORNAMENTATION TECHNIQUES ((EMBRIODERY) Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88249131222002	AMANDEEP KAUR		
2	88249131222003	AMRITPAL KAUR		
3	88249131222004	ASHA RANI		
4	88249131222005	BALJINDER KAUR		
5	88249131222006	GURPREET KAUR		
6	88249131222008	HARPREET KAUR		
7	88249131222009	HARPREET KAUR		
8	88249131222011	JASPREET KAUR		
9	88249131222013	KULDEEP KAUR		
10	88249131222014	KULWINDER KAUR		
11	88249131222015	MEENA KAUR		
12	88249131222016	MOHANPREET KAUR		
13	88249131222017	PARVEEN KAUR		
14	88249131222018	POOJA KAUR		
15	88249131222019	RAMANPREET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 671 / SURFACE ORNAMENTATION TECHNIQUES ((EMBRIODERY) Class: First

Subject : 44434 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 671 / SURFACE ORNAMENTATION TECHNIQUES ((EMBRIODERY) Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88249131222002	AMANDEEP KAUR		
2	88249131222003	AMRITPAL KAUR		
3	88249131222004	ASHA RANI		
4	88249131222005	BALJINDER KAUR		
5	88249131222006	GURPREET KAUR		
6	88249131222008	HARPREET KAUR		
7	88249131222009	HARPREET KAUR		
8	88249131222011	JASPREET KAUR		
9	88249131222013	KULDEEP KAUR		
10	88249131222014	KULWINDER KAUR		
11	88249131222015	MEENA KAUR		
12	88249131222016	MOHANPREET KAUR		
13	88249131222017	PARVEEN KAUR		
14	88249131222018	POOJA KAUR		
15	88249131222019	RAMANPREET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course : 671 / SURFACE ORNAMENTATION TECHNIQUES ((EMBRIODERY) Class: First

Subject : 44435 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 113 / MECHANIC DIESEL

Class: First

Subject : 44411 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88201130219103	SUKHVIR SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 113 / MECHANIC DIESEL

Class: First

Subject : 44413 / ENGINEERING DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88201130219089	Avtar singh		
2	88201130219103	SUKHVIR SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 128 / FITTER

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88227264721032	HARMANPREET SINGH		
2	88227264721033	INDERVEER SINGH		
3	88227264721038	MOHAMMAD MANEER		
4	88227264721041	SAMSHER SINGH		
5	88227264722001	AMRIT SINGH		
6	88227264722005	BINNY VISHAL		
7	88227264722009	GAURAV JOSHI		
8	88227264722011	HARSHPREET SINGH		
9	88227264722016	MANDEEP SINGH		
10	88227264722017	MANPREET SINGH		
11	88227264722018	NAAMJOT SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 128 / FITTER

Class: First

Subject : 44431 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 128 / FITTER

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88227264721033	INDERVEER SINGH		
2	88227264721038	MOHAMMAD MANEER		
3	88227264721041	SAMSHER SINGH		
4	88227264722001	AMRIT SINGH		
5	88227264722005	BINNY VISHAL		
6	88227264722009	GAURAV JOSHI		
7	88227264722011	HARSHPREET SINGH		
8	88227264722016	MANDEEP SINGH		
9	88227264722017	MANPREET SINGH		
10	88227264722018	NAAMJOT SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 128 / FITTER

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 128 / FITTER

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88227264722001	AMRIT SINGH		
2	88227264722005	BINNY VISHAL		
3	88227264722009	GAURAV JOSHI		
4	88227264722011	HARSHPREET SINGH		
5	88227264722016	MANDEEP SINGH		
6	88227264722017	MANPREET SINGH		
7	88227264722018	NAAMJOT SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 128 / FITTER

Class: Second

Subject : 44441 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88227264721029	HARDEV SINGH		
2	88227264721032	HARMANPREET SINGH		
3	88227264721033	INDERVEER SINGH		
4	88227264721038	MOHAMMAD MANEER		
5	88227264721041	SAMSHER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 128 / FITTER

Class: Second

Subject : 44444 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88227264721029	HARDEV SINGH		
2	88227264721032	HARMANPREET SINGH		
3	88227264721033	INDERVEER SINGH		
4	88227264721038	MOHAMMAD MANEER		
5	88227264721041	SAMSHER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 128 / FITTER

Class: Second

Subject : 44445 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88227264721029	HARDEV SINGH		
2	88227264721032	HARMANPREET SINGH		
3	88227264721033	INDERVEER SINGH		
4	88227264721038	MOHAMMAD MANEER		
5	88227264721041	SAMSHER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 132 / ELECTRICIAN

Class: First

Subject : 44413 / ENGINEERING DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231230219123	SWARAN SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 132 / ELECTRICIAN

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231230221001	ANMOLPREET SINGH		
2	88231230221002	ARSHDEEP SINGH		
3	88231264721044	AKASHDEEP SINGH		
4	88231264721045	AMRIT SINGH		
5	88231264721050	BALJINDER SINGH		
6	88231264721055	GURDEEP SINGH		
7	88231264721070	MUKUL DEV KALYAN		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44441 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231230221001	ANMOLPREET SINGH		
2	88231230221002	ARSHDEEP SINGH		
3	88231230221003	BALWANT SINGH		
4	88231230221004	BHUPINDER SINGH		
5	88231230221005	DEEPAK SINGH		
6	88231230221006	GAGANDEEP SINGH		
7	88231230221007	GURWINDER SINGH		
8	88231230221008	GURWINDER SINGH		
9	88231230221010	HARDEEP SINGH		
10	88231230221011	HARJINDER SINGH		
11	88231230221013	HARSHPREET SINGH		
12	88231230221014	KARANVEER SINGH		
13	88231230221015	MANDEP SINGH		
14	88231230221017	MANPREET SINGH		
15	88231230221018	NAVJOT SINGH		
16	88231230221019	RAJPAL SINGH		
17	88231230221020	SUKHJEEVAN SINGH		
18	88231264721044	AKASHDEEP SINGH		
19	88231264721045	AMRIT SINGH		
20	88231264721049	ARSHDEEP SINGH		
21	88231264721050	BALJINDER SINGH		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44441 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88231264721051	BARJESH KUMAR		
23	88231264721053	DHARAM SINGH		
24	88231264721055	GURDEEP SINGH		
25	88231264721059	GURMUKH SINGH		
26	88231264721062	HARDEEP SINGH		
27	88231264721064	JASANDEEP SINGH		
28	88231264721067	JUGRAJ SINGH		
29	88231264721068	KARAMJOT SINGH		
30	88231264721070	MUKUL DEV KALYAN		
31	88231264721071	PAWANDEEP SINGH		
32	88231264721073	RABINDER SINGH		
33	88231264721074	RAMANPREET SINGH		
34	88231264721075	SANDEEP SINGH		
35	88231264721076	SATVIR SINGH		
36	88231264721077	SHEHBAZ ALI		
37	88231264721078	SUKHDEEP SINGH		
38	88231264721080	SURAJ KUMAR		
39	88231264721082	SURINDER SINGH		
40	88231264721084	VEERDAVINDER SINGH		
41	88231264721086	ZORA SINGH		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44441 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44444 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231230221001	ANMOLPREET SINGH		
2	88231230221002	ARSHDEEP SINGH		
3	88231230221003	BALWANT SINGH		
4	88231230221004	BHUPINDER SINGH		
5	88231230221005	DEEPAK SINGH		
6	88231230221006	GAGANDEEP SINGH		
7	88231230221007	GURWINDER SINGH		
8	88231230221008	GURWINDER SINGH		
9	88231230221010	HARDEEP SINGH		
10	88231230221011	HARJINDER SINGH		
11	88231230221013	HARSHPREET SINGH		
12	88231230221014	KARANVEER SINGH		
13	88231230221015	MANDEP SINGH		
14	88231230221017	MANPREET SINGH		
15	88231230221018	NAVJOT SINGH		
16	88231230221019	RAJPAL SINGH		
17	88231230221020	SUKHJEEVAN SINGH		
18	88231264721044	AKASHDEEP SINGH		
19	88231264721045	AMRIT SINGH		
20	88231264721049	ARSHDEEP SINGH		
21	88231264721050	BALJINDER SINGH		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44444 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88231264721051	BARJESH KUMAR		
23	88231264721053	DHARAM SINGH		
24	88231264721055	GURDEEP SINGH		
25	88231264721059	GURMUKH SINGH		
26	88231264721062	HARDEEP SINGH		
27	88231264721064	JASANDEEP SINGH		
28	88231264721067	JUGRAJ SINGH		
29	88231264721068	KARAMJOT SINGH		
30	88231264721070	MUKUL DEV KALYAN		
31	88231264721071	PAWANDEEP SINGH		
32	88231264721073	RABINDER SINGH		
33	88231264721074	RAMANPREET SINGH		
34	88231264721075	SANDEEP SINGH		
35	88231264721076	SATVIR SINGH		
36	88231264721077	SHEHBAZ ALI		
37	88231264721078	SUKHDEEP SINGH		
38	88231264721080	SURAJ KUMAR		
39	88231264721082	SURINDER SINGH		
40	88231264721084	VEERDAVINDER SINGH		
41	88231264721086	ZORA SINGH		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44444 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44445 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231230221001	ANMOLPREET SINGH		
2	88231230221002	ARSHDEEP SINGH		
3	88231230221003	BALWANT SINGH		
4	88231230221004	BHUPINDER SINGH		
5	88231230221005	DEEPAK SINGH		
6	88231230221006	GAGANDEEP SINGH		
7	88231230221007	GURWINDER SINGH		
8	88231230221008	GURWINDER SINGH		
9	88231230221010	HARDEEP SINGH		
10	88231230221011	HARJINDER SINGH		
11	88231230221013	HARSHPREET SINGH		
12	88231230221014	KARANVEER SINGH		
13	88231230221015	MANDEP SINGH		
14	88231230221017	MANPREET SINGH		
15	88231230221018	NAVJOT SINGH		
16	88231230221019	RAJPAL SINGH		
17	88231230221020	SUKHJEEVAN SINGH		
18	88231264721044	AKASHDEEP SINGH		
19	88231264721045	AMRIT SINGH		
20	88231264721049	ARSHDEEP SINGH		
21	88231264721050	BALJINDER SINGH		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44445 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88231264721051	BARJESH KUMAR		
23	88231264721053	DHARAM SINGH		
24	88231264721055	GURDEEP SINGH		
25	88231264721059	GURMUKH SINGH		
26	88231264721062	HARDEEP SINGH		
27	88231264721064	JASANDEEP SINGH		
28	88231264721067	JUGRAJ SINGH		
29	88231264721068	KARAMJOT SINGH		
30	88231264721070	MUKUL DEV KALYAN		
31	88231264721071	PAWANDEEP SINGH		
32	88231264721073	RABINDER SINGH		
33	88231264721074	RAMANPREET SINGH		
34	88231264721075	SANDEEP SINGH		
35	88231264721076	SATVIR SINGH		
36	88231264721077	SHEHBAZ ALI		
37	88231264721078	SUKHDEEP SINGH		
38	88231264721080	SURAJ KUMAR		
39	88231264721082	SURINDER SINGH		
40	88231264721084	VEERDAVINDER SINGH		
41	88231264721086	ZORA SINGH		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 132 / ELECTRICIAN

Class: Second

Subject : 44445 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 145 / ELECTRONICS MECHANIC

Class: First

Subject : 44413 / ENGINEERING DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88219230220060	MOHIT MUNJAL		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 145 / ELECTRONICS MECHANIC

Class: Second

Subject : 44441 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88219230220060	MOHIT MUNJAL		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 145 / ELECTRONICS MECHANIC

Class: Second

Subject : 44444 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88219230220060	MOHIT MUNJAL		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17511 / PRINCIPLE OF EDUCATION

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175134022002	HARJINDER KAUR		
2	88175134022003	LOVEPREET KAUR		
3	88175134022005	MEENU BALA		
4	88175134022006	RUPINDER KAUR		
5	88175134022007	SHUBHDEEP KAUR		
6	88175134022008	SURINDER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17512 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175134022002	HARJINDER KAUR		
2	88175134022003	LOVEPREET KAUR		
3	88175134022005	MEENU BALA		
4	88175134022006	RUPINDER KAUR		
5	88175134022007	SHUBHDEEP KAUR		
6	88175134022008	SURINDER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17513 / PRACTICE OF TEACHING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175134022002	HARJINDER KAUR		
2	88175134022003	LOVEPREET KAUR		
3	88175134022005	MEENU BALA		
4	88175134022006	RUPINDER KAUR		
5	88175134022007	SHUBHDEEP KAUR		
6	88175134022008	SURINDER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17525 / PRACTICAL IV-A (MEN GARMENTS)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175134022002	HARJINDER KAUR		
2	88175134022003	LOVEPREET KAUR		
3	88175134022005	MEENU BALA		
4	88175134022006	RUPINDER KAUR		
5	88175134022007	SHUBHDEEP KAUR		
6	88175134022008	SURINDER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17526 / PRACTICAL IV-B (WOMEN GARMENTS)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175134022002	HARJINDER KAUR		
2	88175134022003	LOVEPREET KAUR		
3	88175134022005	MEENU BALA		
4	88175134022006	RUPINDER KAUR		
5	88175134022007	SHUBHDEEP KAUR		
6	88175134022008	SURINDER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17527 / PRACTICAL IV-C (CHILD. GARMENTS)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175134022002	HARJINDER KAUR		
2	88175134022003	LOVEPREET KAUR		
3	88175134022005	MEENU BALA		
4	88175134022006	RUPINDER KAUR		
5	88175134022007	SHUBHDEEP KAUR		
6	88175134022008	SURINDER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17528 / SCHEME WORK

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175134022002	HARJINDER KAUR		
2	88175134022003	LOVEPREET KAUR		
3	88175134022005	MEENU BALA		
4	88175134022006	RUPINDER KAUR		
5	88175134022007	SHUBHDEEP KAUR		
6	88175134022008	SURINDER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 209 / DATA ENTRY OPERATOR

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88283630322001	AMANDEEP KAUR		
2	88283630322002	AMANJOT KAUR		
3	88283630322003	GURPREET KAUR		
4	88283630322006	HARMANDEEP KAUR		
5	88283630322007	HARPREET KAUR		
6	88283630322010	KAMALJIT KAUR		
7	88283630322011	KIRANDEEP KAUR		
8	88283630322012	KULWINDER KAUR		
9	88283630322013	LOHDEEP KAUR		
10	88283630322014	MANDEEP KAUR		
11	88283630322015	PARDEEP KAUR		
12	88283630322019	RUPINDER KAUR		
13	88283630322021	SHIVANI		
14	88283630322022	SIMRAN KAUR		
15	88283630322023	SUKHWINDER KAUR		
16	88283630322024	VEERPAL KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 209 / DATA ENTRY OPERATOR Class: First

Subject : 44431 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 209 / DATA ENTRY OPERATOR

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88283630322001	AMANDEEP KAUR		
2	88283630322002	AMANJOT KAUR		
3	88283630322003	GURPREET KAUR		
4	88283630322006	HARMANDEEP KAUR		
5	88283630322007	HARPREET KAUR		
6	88283630322010	KAMALJIT KAUR		
7	88283630322011	KIRANDEEP KAUR		
8	88283630322012	KULWINDER KAUR		
9	88283630322013	LOHDEEP KAUR		
10	88283630322014	MANDEEP KAUR		
11	88283630322015	PARDEEP KAUR		
12	88283630322019	RUPINDER KAUR		
13	88283630322021	SHIVANI		
14	88283630322022	SIMRAN KAUR		
15	88283630322023	SUKHWINDER KAUR		
16	88283630322024	VEERPAL KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 209 / DATA ENTRY OPERATOR

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 209 / DATA ENTRY OPERATOR

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88283630322001	AMANDEEP KAUR		
2	88283630322002	AMANJOT KAUR		
3	88283630322003	GURPREET KAUR		
4	88283630322006	HARMANDEEP KAUR		
5	88283630322007	HARPREET KAUR		
6	88283630322010	KAMALJIT KAUR		
7	88283630322011	KIRANDEEP KAUR		
8	88283630322012	KULWINDER KAUR		
9	88283630322013	LOHDEEP KAUR		
10	88283630322014	MANDEEP KAUR		
11	88283630322015	PARDEEP KAUR		
12	88283630322019	RUPINDER KAUR		
13	88283630322021	SHIVANI		
14	88283630322022	SIMRAN KAUR		
15	88283630322023	SUKHWINDER KAUR		
16	88283630322024	VEERPAL KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 209 / DATA ENTRY OPERATOR

Class: First

Subject : 44435 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88242130321020	SIMRANJIT KAUR		
2	88242130322027	JASHANPREET KAUR CHAI		
3	88242130322028	JASPREET KAUR		
4	88242130322029	KAMALJEET KAUR		
5	88242130322031	KAMALJIT KAUR		
6	88242130322033	LOVEPREET KAUR		
7	88242130322034	LOVEPREET KAUR		
8	88242130322036	MEHREEN		
9	88242130322037	NAZIA		
10	88242130322038	PARDEEP KAUR		
11	88242130322039	PRABHJOT KAUR		
12	88242130322040	RAJWINDER KAUR		
13	88242130322041	RAMANDEEP KAUR		
14	88242130322042	RAVLEEN KAUR		
15	88242130322043	RAVNEET KAUR		
16	88242130322044	SAMANDEEP KAUR		
17	88242130322045	SUFIA		
18	88242130322046	SUKHDEEP KAUR		
19	88242130322047	SUKHPREET KAUR		
20	88242130322048	SUMANPREET KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: First

Subject : 44431 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88242130322027	JASHANPREET KAUR CHAI		
2	88242130322028	JASPREET KAUR		
3	88242130322029	KAMALJEET KAUR		
4	88242130322031	KAMALJIT KAUR		
5	88242130322033	LOVEPREET KAUR		
6	88242130322034	LOVEPREET KAUR		
7	88242130322036	MEHREEN		
8	88242130322037	NAZIA		
9	88242130322038	PARDEEP KAUR		
10	88242130322039	PRABHJOT KAUR		
11	88242130322040	RAJWINDER KAUR		
12	88242130322041	RAMANDEEP KAUR		
13	88242130322042	RAVLEEN KAUR		
14	88242130322043	RAVNEET KAUR		
15	88242130322044	SAMANDEEP KAUR		
16	88242130322045	SUFIA		
17	88242130322046	SUKHDEEP KAUR		
18	88242130322047	SUKHPREET KAUR		
19	88242130322048	SUMANPREET KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88242130322027	JASHANPREET KAUR CHAI		
2	88242130322028	JASPREET KAUR		
3	88242130322029	KAMALJEET KAUR		
4	88242130322031	KAMALJIT KAUR		
5	88242130322033	LOVEPREET KAUR		
6	88242130322034	LOVEPREET KAUR		
7	88242130322036	MEHREEN		
8	88242130322037	NAZIA		
9	88242130322038	PARDEEP KAUR		
10	88242130322039	PRABHJOT KAUR		
11	88242130322040	RAJWINDER KAUR		
12	88242130322041	RAMANDEEP KAUR		
13	88242130322042	RAVLEEN KAUR		
14	88242130322043	RAVNEET KAUR		
15	88242130322044	SAMANDEEP KAUR		
16	88242130322045	SUFIA		
17	88242130322046	SUKHDEEP KAUR		
18	88242130322047	SUKHPREET KAUR		
19	88242130322048	SUMANPREET KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: First

Subject : 44435 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 617 / MECHANIC DIESEL ENGINE

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88201164722021	AKASHDEEP SINGH		
2	88201164722023	CHARANJEET SINGH		
3	88201164722024	GURPREET SINGH		
4	88201164722025	HARJOT SINGH SANDHU		
5	88201164722026	HARKOMAL SINGH		
6	88201164722027	JASHANPREET SINGH		
7	88201164722029	KARAN SINGH		
8	88201164722030	LOVEPREET SINGH		
9	88201164722031	MANINDER SINGH		
10	88201164722035	PRABHJOT SINGH		
11	88201164722037	RAJ SINGH		
12	88201164722039	SALEEM MOHD		
13	88201164722042	SUKHVIR SINGH		
14	88201164722044	VIPANDEEP SINGH GILL		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 617 / MECHANIC DIESEL ENGINE

Class: First

Subject : 44431 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 617 / MECHANIC DIESEL ENGINE

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88201164722021	AKASHDEEP SINGH		
2	88201164722023	CHARANJEET SINGH		
3	88201164722024	GURPREET SINGH		
4	88201164722025	HARJOT SINGH SANDHU		
5	88201164722026	HARKOMAL SINGH		
6	88201164722027	JASHANPREET SINGH		
7	88201164722029	KARAN SINGH		
8	88201164722030	LOVEPREET SINGH		
9	88201164722031	MANINDER SINGH		
10	88201164722035	PRABHJOT SINGH		
11	88201164722037	RAJ SINGH		
12	88201164722039	SALEEM MOHD		
13	88201164722042	SUKHVIR SINGH		
14	88201164722044	VIPANDEEP SINGH GILL		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 617 / MECHANIC DIESEL ENGINE

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 617 / MECHANIC DIESEL ENGINE

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88201164722021	AKASHDEEP SINGH		
2	88201164722023	CHARANJEET SINGH		
3	88201164722024	GURPREET SINGH		
4	88201164722025	HARJOT SINGH SANDHU		
5	88201164722026	HARKOMAL SINGH		
6	88201164722027	JASHANPREET SINGH		
7	88201164722029	KARAN SINGH		
8	88201164722030	LOVEPREET SINGH		
9	88201164722031	MANINDER SINGH		
10	88201164722035	PRABHJOT SINGH		
11	88201164722037	RAJ SINGH		
12	88201164722039	SALEEM MOHD		
13	88201164722042	SUKHVIR SINGH		
14	88201164722044	VIPANDEEP SINGH GILL		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 617 / MECHANIC DIESEL ENGINE

Class: First

Subject : 44435 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 654 / MACHINIST

Class: Second

Subject : 44441 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88222230220110	RAJU VERMA		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 654 / MACHINIST

Class: Second

Subject : 44444 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88222230220103	JASHANPREET SINGH		
2	88222230220110	RAJU VERMA		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 660 / WELDER

Class: First

Subject : 44413 / ENGINEERING DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88212130219005	GAGANDEEP SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 662 / REFRIGERATION & AIR CONDITIONING TECHNICIAN

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88218264721127	SUKHCHAIN SINGH		
2	88218264722045	ANKUSH KUMAR GIRI		
3	88218264722047	ARSHDEEP SINGH		
4	88218264722048	ASHISH		
5	88218264722050	GAGANDEEP SINGH		
6	88218264722052	GURJOT SINGH		
7	88218264722053	GURKARAN SINGH		
8	88218264722054	GURMUKH SINGH		
9	88218264722061	MOHAMMAD HAROON		
10	88218264722064	SATVEER SINGH		
11	88218264722068	SURINDER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 662 / REFRIGERATION & AIR CONDITIONING TECHNICIAN Class: First

Subject : 44431 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 662 / REFRIGERATION & AIR CONDITIONING TECHNICIAN

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88218264722045	ANKUSH KUMAR GIRI		
2	88218264722047	ARSHDEEP SINGH		
3	88218264722048	ASHISH		
4	88218264722050	GAGANDEEP SINGH		
5	88218264722052	GURJOT SINGH		
6	88218264722053	GURKARAN SINGH		
7	88218264722054	GURMUKH SINGH		
8	88218264722061	MOHAMMAD HAROON		
9	88218264722064	SATVEER SINGH		
10	88218264722068	SURINDER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 662 / REFRIGERATION & AIR CONDITIONING TECHNICIAN Class: First

Subject : 44434 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 662 / REFRIGERATION & AIR CONDITIONING TECHNICIAN

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88218264722045	ANKUSH KUMAR GIRI		
2	88218264722047	ARSHDEEP SINGH		
3	88218264722048	ASHISH		
4	88218264722050	GAGANDEEP SINGH		
5	88218264722052	GURJOT SINGH		
6	88218264722053	GURKARAN SINGH		
7	88218264722054	GURMUKH SINGH		
8	88218264722061	MOHAMMAD HAROON		
9	88218264722064	SATVEER SINGH		
10	88218264722068	SURINDER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 662 / REFRIGERATION & AIR CONDITIONING TECHNICIAN Class: First

Subject : 44435 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 662 / REFRIGERATION & AIR CONDITIONING TECHNICIAN

Class: Second

Subject : 44441 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88218264720049	GURNEET SINGH		
2	88218264720058	MADHAV KUMAR		
3	88218264720059	MANJOT SINGH		
4	88218264720063	RAMANDEEP SINGH KALIA		
5	88218264720064	SIKANDER SINGH		
6	88218264720066	SULTAN KHAN		
7	88218264721111	ANSOOL KUMAR		
8	88218264721113	JASKARAN SINGH		
9	88218264721116	MANVEER SINGH		
10	88218264721124	SAHIL		
11	88218264721125	SIMRANJIT SINGH		
12	88218264721127	SUKHCHAIN SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 662 / REFRIGERATION & AIR CONDITIONING TECHNICIAN

Class: Second

Subject : 44441 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 662 / REFRIGERATION & AIR CONDITIONING TECHNICIAN

Class: Second

Subject : 44444 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88218264720049	GURNEET SINGH		
2	88218264720058	MADHAV KUMAR		
3	88218264720059	MANJOT SINGH		
4	88218264720062	RAGHVEER SINGH		
5	88218264720063	RAMANDEEP SINGH KALIA		
6	88218264720064	SIKANDER SINGH		
7	88218264720066	SULTAN KHAN		
8	88218264721111	ANSOOL KUMAR		
9	88218264721113	JASKARAN SINGH		
10	88218264721116	MANVEER SINGH		
11	88218264721124	SAHIL		
12	88218264721125	SIMRANJIT SINGH		
13	88218264721127	SUKHCHAIN SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 662 / REFRIGERATION & AIR CONDITIONING TECHNICIAN

Class: Second

Subject : 44444 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 662 / REFRIGERATION & AIR CONDITIONING TECHNICIAN

Class: Second

Subject : 44445 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88218264721111	ANSOOL KUMAR		
2	88218264721113	JASKARAN SINGH		
3	88218264721116	MANVEER SINGH		
4	88218264721124	SAHIL		
5	88218264721125	SIMRANJIT SINGH		
6	88218264721127	SUKHCHAIN SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 679 / OPERATOR ADVANCE MACHINE TOOL

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88284230222003	ARSHDEEP SINGH		
2	88284230222008	RAJINDER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 679 / OPERATOR ADVANCE MACHINE TOOL

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88284230222003	ARSHDEEP SINGH		
2	88284230222008	RAJINDER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course : 679 / OPERATOR ADVANCE MACHINE TOOL

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88284230222003	ARSHDEEP SINGH		
2	88284230222008	RAJINDER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 132 / ELECTRICIAN

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231239622002	BIMALPREET SINGH		
2	88231239622003	DEEPAK		
3	88231239622004	GURPREET SINGH		
4	88231239622006	HARASHPREET SINGH		
5	88231239622008	INDERJEET SINGH		
6	88231239622009	JAGSEER SINGH		
7	88231239622010	JASPREET SINGH		
8	88231239622012	KRISHAN SINGH		
9	88231239622014	MUKESH KUMAR		
10	88231239622016	RAMANDEEP SINGH		
11	88231239622017	SAHIL KUMAR		
12	88231239622018	SONU		
13	88231239622019	VARINDER SINGH		
14	88231239622020	VISHAL KUMAR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 132 / ELECTRICIAN

Class: First

Subject : 44431 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 132 / ELECTRICIAN

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231239622002	BIMALPREET SINGH		
2	88231239622003	DEEPAK		
3	88231239622004	GURPREET SINGH		
4	88231239622006	HARASHPREET SINGH		
5	88231239622008	INDERJEET SINGH		
6	88231239622009	JAGSEER SINGH		
7	88231239622010	JASPREET SINGH		
8	88231239622012	KRISHAN SINGH		
9	88231239622014	MUKESH KUMAR		
10	88231239622016	RAMANDEEP SINGH		
11	88231239622017	SAHIL KUMAR		
12	88231239622018	SONU		
13	88231239622019	VARINDER SINGH		
14	88231239622020	VISHAL KUMAR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 132 / ELECTRICIAN

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 132 / ELECTRICIAN

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231239622002	BIMALPREET SINGH		
2	88231239622003	DEEPAK		
3	88231239622004	GURPREET SINGH		
4	88231239622006	HARASHPREET SINGH		
5	88231239622008	INDERJEET SINGH		
6	88231239622009	JAGSEER SINGH		
7	88231239622010	JASPREET SINGH		
8	88231239622012	KRISHAN SINGH		
9	88231239622014	MUKESH KUMAR		
10	88231239622016	RAMANDEEP SINGH		
11	88231239622017	SAHIL KUMAR		
12	88231239622018	SONU		
13	88231239622019	VARINDER SINGH		
14	88231239622020	VISHAL KUMAR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 132 / ELECTRICIAN

Class: First

Subject : 44435 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17511 / PRINCIPLE OF EDUCATION

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175133119008	BIMAL		
2	88175133119011	EASTJOT KAUR		
3	88175133121008	RASHWINDER KAUR		
4	88175133122001	AMANPREET KAUR		
5	88175133122002	AMANPREET KAUR		
6	88175133122005	BHOLI KAUR		
7	88175133122006	KULWINDER KAUR		
8	88175133122007	LAXHMI. KAUR		
9	88175133122008	MANPREET KAUR		
10	88175133122009	NISHA RANI		
11	88175133122010	PARMJEET KAUR		
12	88175133122011	POOJA RANI		
13	88175133122012	RAJVEER KAUR		
14	88175133122013	RAJVEER KAUR		
15	88175133122014	RAMANDEEP KAUR		
16	88175133122015	SANDEEP KAUR		
17	88175133122016	SANDEEP KAUR		
18	88175133122017	SANDEEP KAUR		
19	88175133122018	SANDEEP KAUR		
20	88175133122019	SARABJEET KAUR		
21	88175133122020	SHARNJEET KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17511 / PRINCIPLE OF EDUCATION

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88175133122021	SUKHWINDER. KAUR		
23	88175133122022	SUMAN. BAI		
24	88175134521005	DALJIT KAUR		
25	88175134521009	JAPJEET KAUR		
26	88175134522001	AMRITPREET KAUR		
27	88175134522002	ARSHVEER KAUR		
28	88175134522003	HARPRIT KAUR		
29	88175134522004	RAJDEEP KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17512 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175133119008	BIMAL		
2	88175133122001	AMANPREET KAUR		
3	88175133122002	AMANPREET KAUR		
4	88175133122005	BHOLI KAUR		
5	88175133122006	KULWINDER KAUR		
6	88175133122007	LAXHMI. KAUR		
7	88175133122008	MANPREET KAUR		
8	88175133122009	NISHA RANI		
9	88175133122010	PARMJEET KAUR		
10	88175133122011	POOJA RANI		
11	88175133122012	RAJVEER KAUR		
12	88175133122013	RAJVEER KAUR		
13	88175133122014	RAMANDEEP KAUR		
14	88175133122015	SANDEEP KAUR		
15	88175133122016	SANDEEP KAUR		
16	88175133122017	SANDEEP KAUR		
17	88175133122018	SANDEEP KAUR		
18	88175133122019	SARABJEET KAUR		
19	88175133122020	SHARNJEET KAUR		
20	88175133122021	SUKHWINDER. KAUR		
21	88175133122022	SUMAN. BAI		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17512 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88175134522001	AMRITPREET KAUR		
23	88175134522002	ARSHVEER KAUR		
24	88175134522003	HARPRIT KAUR		
25	88175134522004	RAJDEEP KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17513 / PRACTICE OF TEACHING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175133122001	AMANPREET KAUR		
2	88175133122002	AMANPREET KAUR		
3	88175133122005	BHOLI KAUR		
4	88175133122006	KULWINDER KAUR		
5	88175133122007	LAXHMI. KAUR		
6	88175133122008	MANPREET KAUR		
7	88175133122009	NISHA RANI		
8	88175133122010	PARMJEET KAUR		
9	88175133122011	POOJA RANI		
10	88175133122012	RAJVEER KAUR		
11	88175133122013	RAJVEER KAUR		
12	88175133122014	RAMANDEEP KAUR		
13	88175133122015	SANDEEP KAUR		
14	88175133122016	SANDEEP KAUR		
15	88175133122017	SANDEEP KAUR		
16	88175133122018	SANDEEP KAUR		
17	88175133122019	SARABJEET KAUR		
18	88175133122020	SHARNJEET KAUR		
19	88175133122021	SUKHWINDER. KAUR		
20	88175133122022	SUMAN. BAI		
21	88175134522001	AMRITPREET KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17513 / PRACTICE OF TEACHING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88175134522002	ARSHVEER KAUR		
23	88175134522003	HARPRIT KAUR		
24	88175134522004	RAJDEEP KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17525 / PRACTICAL IV-A (MEN GARMENTS)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175133122001	AMANPREET KAUR		
2	88175133122002	AMANPREET KAUR		
3	88175133122005	BHOLI KAUR		
4	88175133122006	KULWINDER KAUR		
5	88175133122007	LAXHMI. KAUR		
6	88175133122008	MANPREET KAUR		
7	88175133122009	NISHA RANI		
8	88175133122010	PARMJEET KAUR		
9	88175133122011	POOJA RANI		
10	88175133122012	RAJVEER KAUR		
11	88175133122013	RAJVEER KAUR		
12	88175133122014	RAMANDEEP KAUR		
13	88175133122015	SANDEEP KAUR		
14	88175133122016	SANDEEP KAUR		
15	88175133122017	SANDEEP KAUR		
16	88175133122018	SANDEEP KAUR		
17	88175133122019	SARABJEET KAUR		
18	88175133122020	SHARNJEET KAUR		
19	88175133122021	SUKHWINDER. KAUR		
20	88175133122022	SUMAN. BAI		
21	88175134522001	AMRITPREET KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17525 / PRACTICAL IV-A (MEN GARMENTS)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88175134522002	ARSHVEER KAUR		
23	88175134522003	HARPRIT KAUR		
24	88175134522004	RAJDEEP KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17526 / PRACTICAL IV-B (WOMEN GARMENTS)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175133122001	AMANPREET KAUR		
2	88175133122002	AMANPREET KAUR		
3	88175133122005	BHOLI KAUR		
4	88175133122006	KULWINDER KAUR		
5	88175133122007	LAXHMI. KAUR		
6	88175133122008	MANPREET KAUR		
7	88175133122009	NISHA RANI		
8	88175133122010	PARMJEET KAUR		
9	88175133122011	POOJA RANI		
10	88175133122012	RAJVEER KAUR		
11	88175133122013	RAJVEER KAUR		
12	88175133122014	RAMANDEEP KAUR		
13	88175133122015	SANDEEP KAUR		
14	88175133122016	SANDEEP KAUR		
15	88175133122017	SANDEEP KAUR		
16	88175133122018	SANDEEP KAUR		
17	88175133122019	SARABJEET KAUR		
18	88175133122020	SHARNJEET KAUR		
19	88175133122021	SUKHWINDER. KAUR		
20	88175133122022	SUMAN. BAI		
21	88175134522001	AMRITPREET KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17526 / PRACTICAL IV-B (WOMEN GARMENTS)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88175134522002	ARSHVEER KAUR		
23	88175134522003	HARPRIT KAUR		
24	88175134522004	RAJDEEP KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17527 / PRACTICAL IV-C (CHILD. GARMENTS)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175133122001	AMANPREET KAUR		
2	88175133122002	AMANPREET KAUR		
3	88175133122005	BHOLI KAUR		
4	88175133122006	KULWINDER KAUR		
5	88175133122007	LAXHMI. KAUR		
6	88175133122008	MANPREET KAUR		
7	88175133122009	NISHA RANI		
8	88175133122010	PARMJEET KAUR		
9	88175133122011	POOJA RANI		
10	88175133122012	RAJVEER KAUR		
11	88175133122013	RAJVEER KAUR		
12	88175133122014	RAMANDEEP KAUR		
13	88175133122015	SANDEEP KAUR		
14	88175133122016	SANDEEP KAUR		
15	88175133122017	SANDEEP KAUR		
16	88175133122018	SANDEEP KAUR		
17	88175133122019	SARABJEET KAUR		
18	88175133122020	SHARNJEET KAUR		
19	88175133122021	SUKHWINDER. KAUR		
20	88175133122022	SUMAN. BAI		
21	88175134522001	AMRITPREET KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17527 / PRACTICAL IV-C (CHILD. GARMENTS)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88175134522002	ARSHVEER KAUR		
23	88175134522003	HARPRIT KAUR		
24	88175134522004	RAJDEEP KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17528 / SCHEME WORK

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175133122001	AMANPREET KAUR		
2	88175133122002	AMANPREET KAUR		
3	88175133122005	BHOLI KAUR		
4	88175133122006	KULWINDER KAUR		
5	88175133122007	LAXHMI. KAUR		
6	88175133122008	MANPREET KAUR		
7	88175133122009	NISHA RANI		
8	88175133122010	PARMJEET KAUR		
9	88175133122011	POOJA RANI		
10	88175133122012	RAJVEER KAUR		
11	88175133122013	RAJVEER KAUR		
12	88175133122014	RAMANDEEP KAUR		
13	88175133122015	SANDEEP KAUR		
14	88175133122016	SANDEEP KAUR		
15	88175133122017	SANDEEP KAUR		
16	88175133122018	SANDEEP KAUR		
17	88175133122019	SARABJEET KAUR		
18	88175133122020	SHARNJEET KAUR		
19	88175133122021	SUKHWINDER. KAUR		
20	88175133122022	SUMAN. BAI		
21	88175134522001	AMRITPREET KAUR		

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 175 / CUTTING SEWING & EMBROIDERY TEACHER TRG. Class: First

Subject : 17528 / SCHEME WORK

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88175134522002	ARSHVEER KAUR		
23	88175134522003	HARPRIT KAUR		
24	88175134522004	RAJDEEP KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 370 / ART & CRAFTS

Class: First

Subject : 17055 / CRAFT (T)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370133918004	GURNOORDEEP SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 370 / ART & CRAFTS

Class: First

Subject : 17073 / GEOMETRICAL DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370134219014	GURMEET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 370 / ART & CRAFTS

Class: Second

Subject : 70070 / EDUCATIONAL PSYCHOLOGY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370133918005	HARMANPREET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 370 / ART & CRAFTS

Class: Second

Subject : 70071 / HISTORY & APPRECIATION OF ART

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370133918005	HARMANPREET KAUR		
2	88370133918014	RAMANDEEP KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 660 / WELDER

Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88212139621038	PRABHJOT SINGH		
2	88212139621039	RAJINDER SINGH		
3	88212139622021	AKASHDEEP SINGH		
4	88212139622022	AKASHDEEP SINGH		
5	88212139622025	BUNTY SINGH		
6	88212139622026	DILPREET SINGH		
7	88212139622027	GURLAL SINGH		
8	88212139622029	GURLAL SINGH		
9	88212139622030	GURPREET SINGH		
10	88212139622031	HARPREET SINGH		
11	88212139622032	JAGSEER SINGH		
12	88212139622034	LADDI SINGH		
13	88212139622035	MANI SINGH		
14	88212139622036	RAJWINDER SINGH		
15	88212139622037	RASPREET SINGH		
16	88212139622038	RUBAL SINGH		
17	88212139622040	YADWINDER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 660 / WELDER

Class: First

Subject : 44431 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 660 / WELDER

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88212139622021	AKASHDEEP SINGH		
2	88212139622022	AKASHDEEP SINGH		
3	88212139622025	BUNTY SINGH		
4	88212139622026	DILPREET SINGH		
5	88212139622027	GURLAL SINGH		
6	88212139622029	GURLAL SINGH		
7	88212139622030	GURPREET SINGH		
8	88212139622031	HARPREET SINGH		
9	88212139622032	JAGSEER SINGH		
10	88212139622034	LADDI SINGH		
11	88212139622035	MANI SINGH		
12	88212139622036	RAJWINDER SINGH		
13	88212139622037	RASPREET SINGH		
14	88212139622038	RUBAL SINGH		
15	88212139622040	YADWINDER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 660 / WELDER

Class: First

Subject : 44434 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 660 / WELDER

Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88212139622021	AKASHDEEP SINGH		
2	88212139622022	AKASHDEEP SINGH		
3	88212139622025	BUNTY SINGH		
4	88212139622026	DILPREET SINGH		
5	88212139622027	GURLAL SINGH		
6	88212139622029	GURLAL SINGH		
7	88212139622030	GURPREET SINGH		
8	88212139622031	HARPREET SINGH		
9	88212139622032	JAGSEER SINGH		
10	88212139622034	LADDI SINGH		
11	88212139622035	MANI SINGH		
12	88212139622036	RAJWINDER SINGH		
13	88212139622037	RASPREET SINGH		
14	88212139622038	RUBAL SINGH		
15	88212139622040	YADWINDER SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 660 / WELDER

Class: First

Subject : 44435 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17051 / PAINTING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370234222002	GURNOOR		
2	88370234222003	HARDEEP KAUR		
3	88370234222004	RAJVEER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17055 / CRAFT (T)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370234220005	CHAHAT		
2	88370234221009	MEHAKPREET SINGH		
3	88370234222002	GURNOOR		
4	88370234222003	HARDEEP KAUR		
5	88370234222004	RAJVEER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17059 / DESIGN

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370234222002	GURNOOR		
2	88370234222003	HARDEEP KAUR		
3	88370234222004	RAJVEER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17060 / STILL LIFE

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370234222002	GURNOOR		
2	88370234222003	HARDEEP KAUR		
3	88370234222004	RAJVEER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17065 / CRAFT (P)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370234222002	GURNOOR		
2	88370234222003	HARDEEP KAUR		
3	88370234222004	RAJVEER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17070 / PRINCIPLES OF EDUCATION

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370234220005	CHAHAT		
2	88370234222002	GURNOOR		
3	88370234222003	HARDEEP KAUR		
4	88370234222004	RAJVEER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17071 / HISTORY & APPRECIATION OF ART

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370234222002	GURNOOR		
2	88370234222003	HARDEEP KAUR		
3	88370234222004	RAJVEER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17072 / COMP. AWARENESS & GRAPHICS (T)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370234222002	GURNOOR		
2	88370234222003	HARDEEP KAUR		
3	88370234222004	RAJVEER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17073 / GEOMETRICAL DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370234220015	ROHIT THAPAR		
2	88370234221009	MEHAKPREET SINGH		
3	88370234222002	GURNOOR		
4	88370234222003	HARDEEP KAUR		
5	88370234222004	RAJVEER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17082 / COMP. AWARENESS & GRAPHICS (P)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370234222002	GURNOOR		
2	88370234222003	HARDEEP KAUR		
3	88370234222004	RAJVEER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70051 / PAINTING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370234221004	HARPREET KAUR		
2	88370234221005	KAMALJEET KAUR		
3	88370234221009	MEHAKPREET SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70055 / CRAFT (T)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370234221004	HARPREET KAUR		
2	88370234221005	KAMALJEET KAUR		
3	88370234221009	MEHAKPREET SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70056 / CRAFT (P)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370234221004	HARPREET KAUR		
2	88370234221005	KAMALJEET KAUR		
3	88370234221009	MEHAKPREET SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70070 / EDUCATIONAL PSYCHOLOGY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370234220005	CHAHAT		
2	88370234221004	HARPREET KAUR		
3	88370234221005	KAMALJEET KAUR		
4	88370234221009	MEHAKPREET SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70071 / HISTORY & APPRECIATION OF ART

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370234220005	CHAHAT		
2	88370234220015	ROHIT THAPAR		
3	88370234221004	HARPREET KAUR		
4	88370234221005	KAMALJEET KAUR		
5	88370234221009	MEHAKPREET SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70072 / COMMERCIAL ART

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370234221004	HARPREET KAUR		
2	88370234221005	KAMALJEET KAUR		
3	88370234221009	MEHAKPREET SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70073 / SCALE & PERSPECTIVE DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370234220005	CHAHAT		
2	88370234221004	HARPREET KAUR		
3	88370234221005	KAMALJEET KAUR		
4	88370234221009	MEHAKPREET SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70074 / TEACHING OF ART & CRAFT (P)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370234221004	HARPREET KAUR		
2	88370234221005	KAMALJEET KAUR		
3	88370234221009	MEHAKPREET SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70075 / PROJECT

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370234221004	HARPREET KAUR		
2	88370234221005	KAMALJEET KAUR		
3	88370234221009	MEHAKPREET SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70082 / COMPUTER AWARENESS & GRAPHICS (P)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370234221004	HARPREET KAUR		
2	88370234221005	KAMALJEET KAUR		
3	88370234221009	MEHAKPREET SINGH		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 671 / SURFACE ORNAMENTATION TECHNIQUES ((EMBRIODERY) Class: First

Subject : 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88249130122001	AMARJEET KAUR BAL		
2	88249130122002	ARSHPREET KAUR		
3	88249130122003	DEEPINDERDEEP		
4	88249130122005	GURMEET KAUR		
5	88249130122006	HARPREET KAUR		
6	88249130122007	JASPREET KAUR		
7	88249130122008	MANJEET KAUR		
8	88249130122009	MANPREET KAUR		
9	88249130122013	RAMANDEEP KAUR		
10	88249130122014	RAMANDEEP KAUR		
11	88249130122015	SUKHPREET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 671 / SURFACE ORNAMENTATION TECHNIQUES ((EMBRIODERY) Class: First

Subject : 44431 / TRADE THEORY

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 671 / SURFACE ORNAMENTATION TECHNIQUES ((EMBRIODERY) Class: First

Subject : 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88249130122001	AMARJEET KAUR BAL		
2	88249130122002	ARSHPREET KAUR		
3	88249130122003	DEEPINDERDEEP		
4	88249130122005	GURMEET KAUR		
5	88249130122006	HARPREET KAUR		
6	88249130122007	JASPREET KAUR		
7	88249130122008	MANJEET KAUR		
8	88249130122009	MANPREET KAUR		
9	88249130122013	RAMANDEEP KAUR		
10	88249130122014	RAMANDEEP KAUR		
11	88249130122015	SUKHPREET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 671 / SURFACE ORNAMENTATION TECHNIQUES ((EMBRIODERY) Class: First

Subject : 44434 / EMPLOYBILITY SKILL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 671 / SURFACE ORNAMENTATION TECHNIQUES ((EMBRIODERY) Class: First

Subject : 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88249130122001	AMARJEET KAUR BAL		
2	88249130122002	ARSHPREET KAUR		
3	88249130122003	DEEPINDERDEEP		
4	88249130122005	GURMEET KAUR		
5	88249130122006	HARPREET KAUR		
6	88249130122007	JASPREET KAUR		
7	88249130122008	MANJEET KAUR		
8	88249130122009	MANPREET KAUR		
9	88249130122013	RAMANDEEP KAUR		
10	88249130122014	RAMANDEEP KAUR		
11	88249130122015	SUKHPREET KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course : 671 / SURFACE ORNAMENTATION TECHNIQUES ((EMBRIODERY) Class: First

Subject : 44435 / PRACTICAL

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1433 / INDUSTRIAL TRAINING INSTITUTE (W) , MOONAK

Course : 370 / ART & CRAFTS

Class: Second

Subject : 70071 / HISTORY & APPRECIATION OF ART

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370133518007	TANISHA SAINI		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1433 / INDUSTRIAL TRAINING INSTITUTE (W) , MOONAK

Course : 370 / ART & CRAFTS

Class: Second

Subject : 70073 / SCALE & PERSPECTIVE DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370133517022	RAMANDEEP KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1433 / INDUSTRIAL TRAINING INSTITUTE (W) , MOONAK

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17051 / PAINTING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370233522001	GURVINDER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1433 / INDUSTRIAL TRAINING INSTITUTE (W) , MOONAK

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: First

Subject : 17055 / CRAFT (T)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370233521004	SIMRANJEET KAUR		
2	88370233522001	GURVINDER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1433 / INDUSTRIAL TRAINING INSTITUTE (W) , MOONAK

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17059 / DESIGN

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370233522001	GURVINDER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator

Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1433 / INDUSTRIAL TRAINING INSTITUTE (W) , MOONAK

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17060 / STILL LIFE

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370233522001	GURVINDER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1433 / INDUSTRIAL TRAINING INSTITUTE (W) , MOONAK

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: First

Subject : 17065 / CRAFT (P)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370233522001	GURVINDER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1433 / INDUSTRIAL TRAINING INSTITUTE (W) , MOONAK

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: First

Subject : 17070 / PRINCIPLES OF EDUCATION

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370233521001	JASPREET KAUR		
2	88370233522001	GURVINDER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1433 / INDUSTRIAL TRAINING INSTITUTE (W) , MOONAK

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17071 / HISTORY & APPRECIATION OF ART

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370233522001	GURVINDER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1433 / INDUSTRIAL TRAINING INSTITUTE (W) , MOONAK

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: First

Subject : 17072 / COMP. AWARENESS & GRAPHICS (T)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370233522001	GURVINDER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1433 / INDUSTRIAL TRAINING INSTITUTE (W) , MOONAK

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: First

Subject : 17073 / GEOMETRICAL DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370233520003	HARPREET KAUR		
2	88370233521001	JASPREET KAUR		
3	88370233521004	SIMRANJEET KAUR		
4	88370233521006	VIDYA NAND		
5	88370233522001	GURVINDER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1433 / INDUSTRIAL TRAINING INSTITUTE (W) , MOONAK

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: First

Subject : 17082 / COMP. AWARENESS & GRAPHICS (P)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370233522001	GURVINDER KAUR		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1433 / INDUSTRIAL TRAINING INSTITUTE (W) , MOONAK

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: Second

Subject : 70051 / PAINTING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370233521001	JASPREET KAUR		
2	88370233521004	SIMRANJEET KAUR		
3	88370233521005	SUKHVIR KAUR		
4	88370233521006	VIDYA NAND		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1433 / INDUSTRIAL TRAINING INSTITUTE (W) , MOONAK

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: Second

Subject : 70055 / CRAFT (T)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370233521001	JASPREET KAUR		
2	88370233521004	SIMRANJEET KAUR		
3	88370233521005	SUKHVIR KAUR		
4	88370233521006	VIDYA NAND		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1433 / INDUSTRIAL TRAINING INSTITUTE (W) , MOONAK

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: Second

Subject : 70056 / CRAFT (P)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370233521001	JASPREET KAUR		
2	88370233521004	SIMRANJEET KAUR		
3	88370233521005	SUKHVIR KAUR		
4	88370233521006	VIDYA NAND		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1433 / INDUSTRIAL TRAINING INSTITUTE (W) , MOONAK

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: Second

Subject : 70070 / EDUCATIONAL PSYCHOLOGY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370233521001	JASPREET KAUR		
2	88370233521004	SIMRANJEET KAUR		
3	88370233521005	SUKHVIR KAUR		
4	88370233521006	VIDYA NAND		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1433 / INDUSTRIAL TRAINING INSTITUTE (W) , MOONAK

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70071 / HISTORY & APPRECIATION OF ART

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370233520002	GURPREET SINGH		
2	88370233520003	HARPREET KAUR		
3	88370233521001	JASPREET KAUR		
4	88370233521004	SIMRANJEET KAUR		
5	88370233521005	SUKHVIR KAUR		
6	88370233521006	VIDYA NAND		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1433 / INDUSTRIAL TRAINING INSTITUTE (W) , MOONAK

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE

Class: Second

Subject : 70072 / COMMERCIAL ART

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370233521001	JASPREET KAUR		
2	88370233521004	SIMRANJEET KAUR		
3	88370233521005	SUKHVIR KAUR		
4	88370233521006	VIDYA NAND		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1433 / INDUSTRIAL TRAINING INSTITUTE (W) , MOONAK

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: Second

Subject : 70073 / SCALE & PERSPECTIVE DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370233520003	HARPREET KAUR		
2	88370233521001	JASPREET KAUR		
3	88370233521004	SIMRANJEET KAUR		
4	88370233521005	SUKHVIR KAUR		
5	88370233521006	VIDYA NAND		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1433 / INDUSTRIAL TRAINING INSTITUTE (W) , MOONAK

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: Second

Subject : 70074 / TEACHING OF ART & CRAFT (P)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370233521001	JASPREET KAUR		
2	88370233521004	SIMRANJEET KAUR		
3	88370233521005	SUKHVIR KAUR		
4	88370233521006	VIDYA NAND		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1433 / INDUSTRIAL TRAINING INSTITUTE (W) , MOONAK

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: Second

Subject : 70075 / PROJECT

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370233521001	JASPREET KAUR		
2	88370233521004	SIMRANJEET KAUR		
3	88370233521005	SUKHVIR KAUR		
4	88370233521006	VIDYA NAND		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR July' 2023 EXAMS -SCVT

Center Name : 1433 / INDUSTRIAL TRAINING INSTITUTE (W) , MOONAK

Course : 665 / ART & CRAFT TEACHER TRAINING COURSE Class: Second

Subject : 70082 / COMPUTER AWARENESS & GRAPHICS (P)

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88370233521001	JASPREET KAUR		
2	88370233521004	SIMRANJEET KAUR		
3	88370233521005	SUKHVIR KAUR		
4	88370233521006	VIDYA NAND		

Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

I (Name)_____ (Designation)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller Signature of the Controller

No.Of Students On This Page >> Present>> Absent >>

Name Of Invigilator Signature Of Invigilator