2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Center Name: Course : 113 / MECH. DIESEL Class: First 99911 / Trade Theory Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88201160117144 | ARJUN CHAUHAN Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Course : 113 / MECH. DIESEL Class: First 99912 / WORKSHOP CAL. & SCIENCE Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88201160117144 | ARJUN CHAUHAN Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Center Name: Course : 113 / MECH. DIESEL Class: First 99913 / ENGINEERING DRAWING Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88201160117144 | ARJUN CHAUHAN Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Course : 113 / MECH. DIESEL Class: First 99966 / EMPLOYABILITY SKILLS Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88201160117144 | ARJUN CHAUHAN Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 113 / MECH. DIESEL Class: Second

Subject: 99933 / ENGINEERING DRAWING

Name of the Controller

PAGE: 1

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88201160117144 _I ARJUN CHAUHAN 2 88201160117147 | GURBHAKSH SINGH 88201160117148 | GURDEEP SINGH 3 88201160117156 | RANDHIR KUMAR Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Center Name: Course : 114 / PLUMBER Class: First 99911 / Trade Theory Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88209161117008 | HARJINDER SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been

Signature of the Deputy Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 1

Name of the Deputy Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Center Name: Course : 114 / PLUMBER Class: First 99966 / EMPLOYABILITY SKILLS Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88209161117008 | HARJINDER SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Center Name: Course : 114 / PLUMBER Class: Second 99931 / TRADE THEORY Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88209161117019 | RAMANDEEP SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been

Name of the Deputy Controller

filled correctly as per instructions.

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 114 / PLUMBER Class: Second

Subject: 99932 / WORKSHOP CAL. & SCIENCE

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88209161117005 | GURPAL SINGH $88209161117008_{\mathrm{I}}$ HARJINDER SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller

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

of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 114 / PLUMBER Class: Second

Subject: 99933 / ENGINEERING DRAWING

Name of the Controller

PAGE: 1

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88209160117173 | KULWINDER SINGH 88209161117008 | HARJINDER SINGH 2 3 88209161117018 | PAWANDEEP SINGH 88209161117019 | RAMANDEEP SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 114 / PLUMBER Class: Second

Subject: 99977 / EMPLOYABILITY SKILLS

Name of the Controller

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88209161117005 | GURPAL SINGH $88209161117008_{\mathrm{I}}$ HARJINDER SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 115 / MECH. TRACTOR Class: First

Subject: 99912 / WORKSHOP CAL. & SCIENCE

PAGE: 1 of

Name of the Controller

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88202160117039 | PREM KUMAR 88202160916021 | MANPREET SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 115 / MECH. TRACTOR Class: First

Subject: 99913 / ENGINEERING DRAWING

Name of the Controller

PAGE: 1 of

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88202160117039 | PREM KUMAR 88202160916021 | MANPREET SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 115 / MECH. TRACTOR Class: Second

Subject: 99933 / ENGINEERING DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88202160117036	JAGSIR RAM	<u> </u>	<u> </u>
2	88202160117038	MONU YADAV		<u> </u>
3	88202160117039	PREM KUMAR		<u> </u>
4	88202160117041	RAVI SINGH		<u> </u>
5	88202160916012	HARSEWAK SINGH		<u> </u>
6	88202160916021	MANPREET SINGH		<u> </u>
7	88202160916028	SUKHWINDERJIT SINGH	<u> </u>	<u> </u>
8	88202160916029	SUKHJINDER SINGH	1	I
Tota	I No. Of Students in I No. Of Answer She and Signature Of	eets Packed >	sent:	
			Undertaki ng	
above have	me)_ examination as Invi appeared under my su y undertake that if	(Designation) gilator. I have personally chec upervision in today's exam, have any mistakes are found, I will	ked and ensured that been filled and sha	nereby certify that I have conducted the t particulars of all the students who aded correctly in the OMR sheets. I also any remuneration.
			Si gnat	ture of the Invigilator
l hav fille	e conducted 20% rand d correctly as per i	dom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been
Name	of the Superintender	nt	Si gnat	ture of the Superintendent
l hav fille	e conducted 10% rand d correctly as per i	dom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been
Name	of the Deputy Contro	oller	Si gnat	ture of the Deputy Controller
l ha fille	ve conducted 5% rand d correctly as per i	dom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been
Name	of the Controller		Si gnat	ture of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 126 / MECH. MOTOR VEHICLE

Class: Second

Subject: 99931 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.		
1	88215360115004	LAVNISH				
2	88215360115007	DHEERAJ KUMAR	<u> </u>	L		
3	88215360115018	MANISH KUMAR	<u> </u>	L		
То	Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge					
			Undertaki ng			
I (abo hav her	Name) ve examination as Invi e appeared under my su eby undertake that if	(Designation) gilator. I have personally chec upervision in today's exam, have any mistakes are found, I will	h ked and ensured that been filled and sha not be entitled for	ereby certify that I have conducted the particulars of all the students who ded correctly in the OMR sheets. I also any remuneration.		
			Si gnat	ure of the Invigilator		
l h fil	ave conducted 20% rand led correctly as per i	dom checking of the OMR sheet of nstructions.	the said examinatio	n and found that particulars have been		
Nam	e of the Superintender	nt	Si gnat	ure of the Superintendent		
l h fil	ave conducted 10% rand Led correctly as per i	dom checking of the OMR sheet of nstructions.	the said examinatio	n and found that particulars have been		
Nam			0.1			
rvam	e of the Deputy Contro	oller	Si gnat	ure of the Deputy Controller		
ı	, ,	dom checking of the OMR sheet of	-	ure of the Deputy Controller n and found that particulars have been		

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING
PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT
Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA
Course: 128 / FITTER Class: Second
Subject: 99931 / TRADE THEORY

S.N	.No Regd. No. Name Of the Student Answer Sheet No. Student's Sign.				
1	88227261116001 ARJUN KUMAR				
2 					
•	Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge				
	Undertaki ng				
h	I (Name) hereby certify that I have conduct above examination as Invigilator. I have personally checked and ensured that particulars of all the students have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.	ed the who I also			
	Signature of the Invigilator				
	I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have filled correctly as per instructions.	been			
N	Name of the Superintendent Signature of the Superintendent				
l f	I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have filled correctly as per instructions.	been			
N	Name of the Deputy Controller Signature of the Deputy Controller				
	I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have filled correctly as per instructions.	e been			

Signature of the Controller

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING
PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT
Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA
Course: 128 / FITTER Class: Third

99951 / TRADE THEORY

Subject:

Name of the Superintendent Signature of the Superintendent

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

Name of the Deputy Controller Signature of the Deputy Controller

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

Name of the Controller Signature of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 128 / FITTER Class: Third

Subject: 99953 / ENGINEERING DRAWING

S.No 	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
 	88227261116003	JAGPAL SINGH	<u> </u>	
<u>)</u> 	88227261116005	MOHIT CHAUHAN	<u> </u>	L
3	88227261116018	MAHESH CHAND	<u> </u>	<u> </u>
То		this Subject > Present : Absects Packed >	sent:	
			Undertaki ng	
abò\ have	e appeared under my su	(Designation) gilator. I have personally chec pervision in today's exam, have any mistakes are found, I will	ked and ensured that been filled and sha	ereby certify that I have conducted the particulars of all the students who ded correctly in the OMR sheets. I also any remuneration.
			Si gnat	ure of the Invigilator
l ha fill	ave conducted 20% rand led correctly as per i	lom checking of the OMR sheet of nstructions.	the said examination	n and found that particulars have been
Name	e of the Superintenden	nt	Si gnat	ure of the Superintendent
l ha fill	ave conducted 10% rand led correctly as per i	lom checking of the OMR sheet of nstructions.	the said examination	n and found that particulars have been
Name	e of the Deputy Contro	ller	Si gnati	ure of the Deputy Controller
l l fill	nave conducted 5% rand led correctly as per i	lom checking of the OMR sheet of nstructions.	the said examination	n and found that particulars have been
Name	e of the Controller		Si gnat	ure of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 128 / FITTER Class: Fourth

Subject: 99971 / TRADE THEORY

S.No	Regd. No.		Name Of the Student	Answer Sheet No.	Student's Sign.
1	8822726111	6001 ARJU	N KUMAR		1
2					<u></u>
3					1
То	otal No. Of Stude otal No. Of Answe	er Sheets Pa	cked >	lbsent: Undertaki ng	
have	e appeared under	my supervisi	(Designation) T. I have personally chon in today's exam, hastakes are found, I wil	ave been filled and sha	nereby certify that I have conducted the t particulars of all the students who aded correctly in the OMR sheets. I also any remuneration.
				Si gna	ture of the Invigilator
l ha fill	ave conducted 209 Led correctly as	% random chec per instruct	cking of the OMR sheet ions.	of the said examination	on and found that particulars have been
Name	e of the Superin	tendent		Si gna	ture of the Superintendent
l ha fill	ave conducted 109 Led correctly as	% random chec per instruct	cking of the OMR sheet ions.	of the said examination	on and found that particulars have been
Name	e of the Deputy (Controller		Si gna	ture of the Deputy Controller
l l fill	have conducted 59 led correctly as	% random chec per instruct	cking of the OMR sheet cions.	of the said examination	on and found that particulars have been
Name	e of the Control	ler		Si gna	ture of the Controller

2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Center Name: Course : 128 / FITTER Class: Fourth 99972 / WORKSHOP CAL. & SCIENCE Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88227261116018 | MAHESH CHAND Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Course : 130 / MACHINIST (COMPOSITE) Class: First 99911 / Trade Theory Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88222260117060 | NARJIT ALI Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been

Signature of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 1 of

filled correctly as per instructions.

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Course : 130 / MACHINIST (COMPOSITE) Class: First 99912 / WORKSHOP CAL. & SCIENCE Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88222260117059 | MANISH KUMAR Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Course : 130 / MACHINIST (COMPOSITE) Class: First 99913 / ENGINEERING DRAWING Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88222260117059 | MANISH KUMAR Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 of ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Course : 130 / MACHINIST (COMPOSITE) Class: First 99966 / EMPLOYABILITY SKILLS Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88222260117060 | NARJIT ALI Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

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

Name of the Deputy Controller Signature of the Deputy Controller

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

Name of the Controller Signature of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 130 / MACHINIST (COMPOSITE)

Class: Second

Subject: 99931 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88222260117048	AKASH KUMAR MISHRA		
2	88222260117053	GURBAKSH SINGH	<u> </u>	<u> </u>
3	88222260117054	HARDEEP SINGH PANESAF	<u> </u>	L
4	88222260117057	MANI KUMAR		L
5	88222260117058			<u> </u>
6	88222260117060	NARJIT ALI		<u> </u>
7	88222260117061			<u> </u>
To	tal No. Of Answer She me and Signature Of	eets Packed >	sent:	
			Undertaki ng	
I (N abov have here	Name) ve examination as Invi e appeared under my su eby undertake that if	(Designation) gilator. I have personally chec pervision in today's exam, have any mistakes are found, I will	h ked and ensured that been filled and sha not be entitled for	pereby certify that I have conducted the particulars of all the students who ded correctly in the OMR sheets. I also any remuneration.
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Name	e of the Superintenden	t	Si gnat	ure of the Superintendent
l ha fill	ave conducted 10% rand ed correctly as per i	lom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been
Name	e of the Deputy Contro	ller	Si gnat	ure of the Deputy Controller
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Name	e of the Controller		Si gnat	ure of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

130 / MACHINIST (COMPOSITE)

Course: Class: Third

Subject: 99951 / TRADE THEORY

Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
88222260117048	AKASH KUMAR MISHRA		
88222260117053	GURBAKSH SINGH	<u> </u>	1
88222260117054	HARDEEP SINGH PANESAI	<u> </u>	1
88222260117057	MANI KUMAR	<u> </u>	
88222260117058	MANISH KUMAR	1	1
88222260117060	NARJIT ALI	<u> </u>	1
88222260117061			
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		the said examination	on and found that particulars have been
e of the Deputy Contro	ller	Si gnat	ture of the Deputy Controller
		the said examination	on and found that particulars have been
e of the Controller		Si gnat	ture of the Controller
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ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

PAGE: 1

130 / MACHINIST (COMPOSITE)

Course: Class: Third

99952 / WORKSHOP CAL. & SCIENCE Subject:

S.No Regd. No. Name Of the Student Student's Sign. Answer Sheet No. 88222260117048 _I AKASH KUMAR MISHRA 2 3 88222260117054 | HARDEEP SINGH PANESAF 88222260117057 _IMANI KUMAR 5 88222260117058 | MANISH KUMAR 88222260117060 | NARJIT ALI 88222260117061 | RAHUL KUMAR Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng (Designation)_ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Controller Signature of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 1 of 1 Center Name:

2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 130 / MACHINIST (COMPOSITE)

Class: Third

Subject: 99953 / ENGINEERING DRAWING

Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
88222260117048	AKASH KUMAR MISHRA		
88222260117053	GURBAKSH SINGH	<u> </u>	L
88222260117054	HARDEEP SINGH PANESAF	<u> </u>	L
88222260117057	JMANI KUMAR	<u> </u>	L
88222260117058	MANISH KUMAR	<u> </u>	L
88222260117060	NARJIT ALI	<u> </u>	L
88222260117061			<u></u>
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		the said examinatio	on and found that particulars have been
e of the Deputy Contro	oller	Si gnat	ure of the Deputy Controller
		the said examinatio	on and found that particulars have been
e of the Controller		Si gnat	ure of the Controller
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ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 1 of 1 Center Name:

2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

130 / MACHINIST (COMPOSITE)

Course:

Class: Third

Subject: 99955 / TRADE PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.	
1	88222260117048	AKASH KUMAR MISHRA	<u> </u>	<u>L</u>	
2	88222260117053	GURBAKSH SINGH	<u> </u>		
3	88222260117054	HARDEEP SINGH PANESAI	L	<u> </u>	
4	88222260117057	MANI KUMAR	L	<u> </u>	
5	88222260117058	MANISH KUMAR	L	<u> </u>	
6	88222260117060	NARJIT ALI	<u> </u>		
7	88222260117061	RAHUL KUMAR	L		
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			Undertaki ng		
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Name	e of the Superintender	t	Si gnat	cure of the Superintendent	
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Name	e of the Controller		Si gnat	cure of the Controller	

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Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 132 / ELECTRICIAN Class: First

Subject: 99911 / Trade Theory

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.	
1	88231260117066	DEEPAK KUMAR	1		
2		CURRET SINCU			
3	88231260117074				
4	88231260117077	DA LAT CINCII			
5	88231260117079	TEJINDER SINGH			
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Name	of the Superintender	nt	Si gna	ture of the Superintendent	
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Name	of the Deputy Contro	oller	Si gna	ture of the Deputy Controller	
l h fill	ave conducted 5% ranc ed correctly as per i	dom checking of the OMR sheet of nstructions.	f the said examination	on and found that particulars have been	
Name	of the Controller		Silgna	ture of the Controller	

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 132 / ELECTRICIAN Class: First

Subject: 99912 / WORKSHOP CAL. & SCIENCE

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231260117066	DEEPAK KUMAR		
2	88231260117070	JAGRAJ SINGH	<u> </u>	1
3	88231260117072	JODHVEER SINGH	<u> </u>	1
4		KDICHANIKHNAAD		
5	88231260117075			1
6	88231260117083	NITINI KUMAD		1
7	88231260117084	\(\(\)\(\)		1
Tot	al No. Of Answer She me and Signature Of			
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	ive conducted 10% rand ed correctly as per i		the said examination	on and found that particulars have been
Name	e of the Deputy Contro	ller	Si gnat	ture of the Deputy Controller
	nave conducted 5% rand ed correctly as per i		the said examination	on and found that particulars have been
Name	e of the Controller		Si gnat	ture of the Controller

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Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 132 / ELECTRICIAN Class: First

Subject: 99913 / ENGINEERING DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231260117066	DEEPAK KUMAR	<u> </u>	
2	88231260117070	JAGRAJ SINGH		
3	88231260117072	IODUVEED SINICH		
4	88231260117074	KDICHANI KUMAD		
5				
6	88231260117083	NITINI VIINAA D		
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	al No. Of Answer She me and Signature Of			
			Undertaki ng	
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Name	of the Deputy Contro	ller	Si gna	ture of the Deputy Controller
	ave conducted 5% ranc ed correctly as per i		the said examinati	on and found that particulars have been
Name	of the Controller		Si gna	ture of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 132 / ELECTRICIAN Class: First

Subject: 99966 / EMPLOYABILITY SKILLS

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.			
1	88231260117066	DEEPAK KUMAR					
2	88231260117067	GURPREET SINGH		<u> </u>			
3	88231260117074	KRISHAN KUMAR	<u> </u>	<u> </u>			
4	88231260117077	DA IAT CINCII		<u> </u>			
5	88231260117079	TEJINDER SINGH		<u></u>			
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have	have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.						
	Signature of the Invigilator						
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Name	of the Superintender	nt	Signature of the Superintendent				
I ha fill	I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.						
Name	e of the Deputy Contro	oller	Signature of the Deputy Controller				
l h fill	I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.						
Name	of the Controller		Si gnat	ture of the Controller			

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Center Name:

Course: 132 / ELECTRICIAN Class: Second

Subject: 99931 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231260117066	DEEPAK KUMAR	<u> </u>	<u> </u>
2	88231260117067	GURPREET SINGH		<u> </u>
3	88231260117068	HARDEEP SINGH		<u> </u>
4	88231260117069	HARMAN SINGH		<u> </u>
5 	88231260117070	JAGRAJ SINGH		<u> </u>
6	88231260117073	JATINDERPAL SINGH		<u> </u>
7	88231260117075	KRISHNA		<u> </u>
8	88231260117077	RAJAT SINGH		<u> </u>
9	88231260117079	TEJINDER SINGH		<u> </u>
10 <u> </u>	88231260117080	VAIBHAV		<u> </u>
11	88231260117082	YOGESH KUMAR PRAJAPA	<u></u>	<u></u>

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
PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT
Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA
Course: 132 / ELECTRICIAN Class: Second

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

99931 / TRADE THEORY

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Subject:

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 132 / ELECTRICIAN Class: Second

Subject: 99933 / ENGINEERING DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231260117071	JATINDERPAL SINGH		<u> </u>
2	88231260117073	JATINDERPAL SINGH	<u> </u>	<u> </u>
3	88231260117074	KRISHAN KUMAR	<u></u>	L
4	88231260117077	_J RAJAT SINGH	<u></u>	<u></u>
5	88231260117079	TEJINDER SINGH	<u></u>	L
6	88231260117080	_J VAIBHAV	<u></u>	L
7	88231260117081	VICKRAMJEET SINGH	<u></u>	L
8	88231260117083	NITIN KUMAR	<u> </u>	L
9	88231260117084	VIJAY		I
To	otal No. Of Students in otal No. Of Answer Sho ame and Signature Of	eets Packed >	sent:	
			Undertaki ng	
I (abo hav her	(Name) ove examination as Invi ve appeared under my su reby undertake that if	(Designation) gilator. I have personally chec upervision in today's exam, have any mistakes are found, I will	ked and ensured that been filled and sha not be entitled for	nereby certify that I have conducted the particulars of all the students who ded correctly in the OMR sheets. I also any remuneration.
			Si gnat	ure of the Invigilator
	nave conducted 20% rand led correctly as per i		the said examination	on and found that particulars have been
Nan	ne of the Superintender	nt	Si gnat	ure of the Superintendent
	nave conducted 10% rand led correctly as per i		the said examination	on and found that particulars have been
Nan	ne of the Deputy Contro	oller	Si gnat	ure of the Deputy Controller
l fi l	have conducted 5% rand led correctly as per i	dom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been
Nan	ne of the Controller		Si gnat	ture of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Center Name:

Course: 132 / ELECTRICIAN Class: Third

Subject: 99951 / TRADE THEORY

PAGE: 1

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

3.NO			Allswei Sheet No.	
1	88231260117066	DEEPAK KUMAR		<u></u>
2	88231260117067	GURPREET SINGH		L
3	88231260117068	HARDEEP SINGH		L
4	88231260117069	HARMAN SINGH		L
5 	88231260117070	JAGRAJ SINGH		L
6	88231260117071	JATINDERPAL SINGH		L
7 	88231260117072	JODHVEER SINGH		L
8	88231260117073	JATINDERPAL SINGH		L
9	88231260117074	KRISHAN KUMAR		L
10	88231260117075	KRISHNA		L
11	88231260117077	RAJAT SINGH		L
12	88231260117079	TEJINDER SINGH		L
13	88231260117080	VAIBHAV		L
14	88231260117081	VICKRAMJEET SINGH		L
15	88231260117082	YOGESH KUMAR PRAJAPA		L
16	88231260117083	NITIN KUMAR		
17 <u> </u>	88231260117084	YALIV		 L
4				

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 PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Center Name:

Course: 132 / ELECTRICIAN Class: Third

99951 / TRADE THEORY Subject:

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 132 / ELECTRICIAN Class: Third

Subject: 99952 / WORKSHOP CAL. & SCIENCE

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231260117066	DEEPAK KUMAR	<u> </u>	<u> </u>
2	88231260117067	GURPREET SINGH	<u> </u>	<u> </u>
3	88231260117068	HARDEEP SINGH	<u> </u>	<u> </u>
4	88231260117069	_J HARMAN SINGH	<u> </u>	<u> </u>
5 	88231260117070	JAGRAJ SINGH		L
6	88231260117071	JATINDERPAL SINGH		L
7	88231260117072	JODHVEER SINGH	<u> </u>	<u> </u>
8	88231260117073	JATINDERPAL SINGH	<u> </u>	<u> </u>
9	88231260117074	KRISHAN KUMAR		L
10	88231260117075	KRISHNA	<u> </u>	<u> </u>
11	88231260117077	RAJAT SINGH	<u> </u>	<u> </u>
12	88231260117079	TEJINDER SINGH	<u> </u>	<u> </u>
13	88231260117080	VAIBHAV	<u> </u>	<u> </u>
14	88231260117081	VICKRAMJEET SINGH	<u> </u>	L
15	88231260117082	YOGESH KUMAR PRAJAPA	<u> </u>	L
16	88231260117083	NITIN KUMAR	<u> </u>	<u> </u>
17	88231260117084	VALIVI		<u> </u>
18	88231261116026	MOHAMMAD SARFUDDIN	<u></u>	<u></u>

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

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING
PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT
Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA
Course: 132 / ELECTRICIAN Class: Third
Subject: 99952 / WORKSHOP CAL. & SCIENCE

Total No. Of Students in this Subject > Present: Absent:
Total No. Of Answer Sheets Packed >
Name and Signature Of Incharge

Undertaking

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

Signature of the Invigilator

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

Name of the Superintendent Signature of the Superintendent

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

Signature of the Deputy Controller

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

Name of the Controller Signature of the Controller

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 132 / ELECTRICIAN Class: Third

Subject: 99953 / ENGINEERING DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231260117066	DEEPAK KUMAR	<u> </u>	L
2	88231260117067	GURPREET SINGH	L	L
3	88231260117068	HARDEEP SINGH	L	L
4	88231260117069	_J HARMAN SINGH	L	L
5	88231260117070	JAGRAJ SINGH	L	L
6	88231260117071	JATINDERPAL SINGH	L	L
7	88231260117072	JODHVEER SINGH	<u> </u>	L
8	88231260117073	JATINDERPAL SINGH	<u> </u>	L
9	88231260117074	KRISHAN KUMAR	<u> </u>	L
10	88231260117075	KRISHNA	<u> </u>	L
11	88231260117077	RAJAT SINGH	<u> </u>	L
12	88231260117079	TEJINDER SINGH	<u> </u>	L
13	88231260117080	_J VAIBHAV	<u> </u>	L
14	88231260117081	VICKRAMJEET SINGH	<u> </u>	L
15	88231260117082	YOGESH KUMAR PRAJAPA	<u> </u>	L
16	88231260117083	NITIN KUMAR	<u> </u>	L
17	88231260117084	VIJAY	<u> </u>	L
18	88231261116022	GURPINDER SINGH	<u> </u>	L
19	88231261116031	PRINCE KUMAR	<u> </u>	
20	88231261116039	_J MANPREET SINGH	 	<u></u>
21	88231261116151	KULDEV SINGH		L
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PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Center Name: Course : 132 / ELECTRICIAN Class: Third 99953 / ENGINEERING DRAWING Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88231261116155 | SANDEEP KUMAR

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

Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 132 / ELECTRICIAN Class: Third

Subject: 99955 / TRADE PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231260117066	DEEPAK KUMAR	L	<u></u>
2	88231260117067	GURPREET SINGH	<u> </u>	L
3	88231260117068	HARDEEP SINGH	<u> </u>	L
4	88231260117069	_J HARMAN SINGH	<u> </u>	L
5	88231260117070	JAGRAJ SINGH	<u> </u>	L
6	88231260117071	JATINDERPAL SINGH	<u> </u>	L
7	88231260117072	JODHVEER SINGH	<u> </u>	L
8	88231260117073	JATINDERPAL SINGH	L	L
9	88231260117074	KRISHAN KUMAR	<u> </u>	L
10	88231260117075	KRISHNA	<u> </u>	L
11	88231260117077	RAJAT SINGH	<u> </u>	L
12	88231260117079	TEJINDER SINGH	L	L
13	88231260117080	_J VAIBHAV	<u> </u>	L
14	88231260117081	JVICKRAMJEET SINGH	<u> </u>	L
15	88231260117082	YOGESH KUMAR PRAJAPA	L	L
16	88231260117083	JNITIN KUMAR	L	
17	88231260117084	YALIV	L	L

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 PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Center Name:

Course: 132 / ELECTRICIAN Class: Third

99955 / TRADE PRACTICAL Subject:

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 132 / ELECTRICIAN Class: Fourth

Subject: 99973 / ENGINEERING DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231261116021	JGURPAL SINGH	L	<u></u>
2	88231261116022	GURPINDER SINGH	L	L
3	88231261116023	HARINDER SINGH	L	L
4	88231261116024	JAGDEEP KUMAR	L	L
5	88231261116025	JAGRAJ SINGH	L	L
6	88231261116026	MOHAMMAD SARFUDDIN	<u> </u>	L
7	88231261116027	_J MANJOT SINGH	L	L
8	88231261116031	PRINCE KUMAR	L	L
9	88231261116032	JRAHUL KUMAR	L	L
10	88231261116035	SUKHPREET SINGH	L	L
11	88231261116036	SUKHWINDER SINGH	L	L
12	88231261116037	SUNNY	L	L
13	88231261116039	JMANPREET SINGH	L	L
14	88231261116040	RAMANDEEP SINGH	<u> </u>	L
15	88231261116141	BALJINDER SINGH	<u> </u>	L
16	88231261116151	KULDEV SINGH	<u> </u>	L
17	88231261116152	KULJIT SINGH	<u> </u>	L
18	88231261116155	SANDEEP KUMAR	<u> </u>	
19	88231261116156	SIMRANJEET SINGH	 	<u> </u>
20	88231261116157	SUKHCHAIN SINGH		<u> </u>
				·

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING
PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS - SCVT
Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA
Course: 132 / ELECTRICIAN Class: Fourth
Subject: 99973 / ENGINEERING DRAWING

Total No. Of Students in this Subject > Present: Absent:
Total No. Of Answer Sheets Packed >
Name and Signature Of Incharge

Undertaking

I (Name) ______ hereby certify that I have conducted and operated that particulars of all the student

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 132 / ELECTRICIAN Class: Fourth

Subject: 99975 / TRADE PRACTICAL

S.No		Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.		
1		88231261116027	_J MANJOT SINGH	<u> </u>	L		
2					L		
3					L		
To	Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaking						
I (abc hav her	Name ove e ve ap eby	e) xamination as Inv peared under my s undertake that if	(Designation) igilator. I have personally chec upervision in today's exam, have any mistakes are found, I will	ked and ensured that been filled and sha not be entitled for	ereby certify that I have conducted the particulars of all the students who ded correctly in the OMR sheets. I also any remuneration.		
				Si gnat	ure of the Invigilator		
l h fil	ave I ed	conducted 20% ran correctly as per	dom checking of the OMR sheet of instructions.	the said examinatio	n and found that particulars have been		
Nam	ne of	the Superintende	nt	Si gnat	ure of the Superintendent		
l h fil	ave I ed	conducted 10% ran correctly as per	dom checking of the OMR sheet of instructions.	the said examinatio	n and found that particulars have been		
Nam	ne of	the Deputy Contr	oller	Si gnat	ure of the Deputy Controller		
l fi l	have I ed	conducted 5% ran correctly as per	dom checking of the OMR sheet of instructions.	the said examinatio	n and found that particulars have been		
Nam	ne of	the Controller		Si gnat	ure of the Controller		

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Course : 134 / ELECTRO PLATOR Class: Second 99931 / TRADE THEORY Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88233260116031 $_{
m I}$ JASDEEP SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 134 / ELECTRO PLATOR Class: Third

Subject: 99951 / TRADE THEORY

S.No		Regd. No.	Na	ame Of the Student	Answer Sheet No.	Student's Sign.	
1	<u> </u>	88233260117086	HARJIT	SINGH	<u> </u>	L	
2	<u> </u>						
3	<u></u>	88233260117092				<u></u>	
To	Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaking						
I (abo hav her	Name ve e e ap eby)_ xamination as Inv peared under my s undertake that if	(De igilator. upervision any mista	esignation) I have personally chec n in today's exam, have akes are found, I will	ked and ensured that been filled and sha not be entitled for	ereby certify that I have conducted the particulars of all the students who ded correctly in the OMR sheets. I also any remuneration.	
					Si gnat	ure of the Invigilator	
l h fil	ave I ed	conducted 20% ran correctly as per	dom checki instructic	ng of the OMR sheet of ons.	the said examination	n and found that particulars have been	
Nam	e of	the Superintende	nt		Si gnat	ure of the Superintendent	
l h fil	I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.						
Nam	e of	the Deputy Contr	oller		Si gnat	ure of the Deputy Controller	
l fil	have I ed	conducted 5% ran correctly as per	dom checki instructic	ng of the OMR sheet of	the said examination	n and found that particulars have been	
Nam	e of	the Controller			Si gnat	ure of the Controller	

1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 134 / ELECTRO PLATOR Class: Third

Subject: 99952 / WORKSHOP CAL. & SCIENCE

PAGE: 1 of

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88233260117086 | HARJIT SINGH 88233260117090 | LOVEPREET SINGH 3 88233260117092 | RAVINDER SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Controller Signature of the Controller

1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 134 / ELECTRO PLATOR Class: Third

Subject: 99953 / ENGINEERING DRAWING

Name of the Controller

PAGE: 1

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88233260116031 | JASDEEP SINGH 88233260117086 | HARJIT SINGH 2 3 88233260117090 | LOVEPREET SINGH 88233260117092 | RAVINDER SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 134 / ELECTRO PLATOR Class: Third

Subject: 99955 / TRADE PRACTICAL

PAGE: 1 of

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88233260117086 | HARJIT SINGH 88233260117090 | LOVEPREET SINGH 3 88233260117092 | RAVINDER SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Controller Signature of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Course : 134 / ELECTRO PLATOR Class: Fourth 99973 / ENGINEERING DRAWING Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88233260116031 | JASDEEP SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Center Name: Course : 144 / SURVEYOR Class: First 99911 / Trade Theory Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88207260117214 | HARMANPREET SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been

Signature of the Deputy Controller

Signature of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 1

Name of the Deputy Controller

Name of the Controller

filled correctly as per instructions.

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 144 / SURVEYOR Class: First

Subject: 99912 / WORKSHOP CAL. & SCIENCE

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.			
1	88207260117236	SURINDER SINGH					
2				<u></u>			
3				<u> </u>			
4							
T N I abe	Total No. Of Students in this Subject > Present: Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaking I (Name) hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.						
			Si gnat	ure of the Invigilator			
l fi	have conducted 20% rand lled correctly as per i	lom checking of the OMR sheet of nstructions.	the said examinatio	n and found that particulars have been			
Nai	me of the Superintenden	nt	Si gnat	ure of the Superintendent			
l fi	I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.						
Naı	me of the Deputy Contro	ller	Si gnat	ure of the Deputy Controller			
l fi	have conducted 5% rand lled correctly as per i	lom checking of the OMR sheet of nstructions.	the said examinatio	n and found that particulars have been			
Nai	me of the Controller		Si gnat	ure of the Controller			

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Center Name: Course : 144 / SURVEYOR Class: First 99915 / TRADE PRACTICAL Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88207260117237 | TEJINDER SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Center Name: Course : 144 / SURVEYOR Class: First 99966 / EMPLOYABILITY SKILLS Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88207260117214 | HARMANPREET SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 144 / SURVEYOR Class: Second

Subject: 99931 / TRADE THEORY

S.No		Regd. No.	Name C	f the Student	Answer Sheet No.	Student's Sign.
1		88207260117203	JAMAN KUMA	λR	1	L
2						<u></u>
3		88207260117241	\	211		<u> </u>
Т	otal I	No. Of Students ir No. Of Answer Sh and Signature Of	neets Packed >	Present: Ab	sent: Undertaki ng	
I ab ha he	(Name ove e ve ap reby	e) examination as Inv opeared under my s undertake that if	(Designa rigilator. I hav supervision in t any mistakes a	ation)_ ve personally chec coday's exam, have are found, I will	h cked and ensured that	nereby certify that I have conducted the particulars of all the students who aded correctly in the OMR sheets. I also any remuneration.
			,			ture of the Invigilator
l fi	have I I ed	conducted 20% rancorrectly as per	dom checking of instructions.	the OMR sheet of	f the said examination	on and found that particulars have been
Na	me of	the Superintende	ent		Si gna	ture of the Superintendent
l fi	have I I ed	conducted 10% rancorrectly as per	dom checking of instructions.	the OMR sheet of	the said examination	on and found that particulars have been
Na	me of	f the Deputy Contr	oller		Si gna	ture of the Deputy Controller
l fi	have Hed	e conducted 5% ran correctly as per	dom checking of instructions.	the OMR sheet of	f the said examination	on and found that particulars have been
Na	me of	the Controller			Si gna	ture of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

145 / ELECTRONICS MECHANIC

Course: Class: Second

Subject: 99931 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.			
l 	89219260115076	DARSHDEEP SINGH	<u> </u>				
2	89219260115092	TARANPREET SINGH	L	L			
3	89219260915011	GURJANT SINGH	<u> </u>	L			
Tot	Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge						
			Undertaki ng				
I (N abov have here	ame)e examination as Invi appeared under my su by undertake that if	(Designation) gilator. I have personally chec pervision in today's exam, have any mistakes are found, I will	ked and ensured that been filled and sha not be entitled for a	ereby certify that I have conducted the particulars of all the students who ded correctly in the OMR sheets. I also any remuneration.			
				ure of the Invigilator			
l ha fill	ve conducted 20% rand ed correctly as per i	lom checking of the OMR sheet of nstructions.	the said examination	n and found that particulars have been			
Name	of the Superintenden	t	Si gnat	ure of the Superintendent			
l ha fill	ve conducted 10% rand ed correctly as per i	lom checking of the OMR sheet of nstructions.	the said examination	n and found that particulars have been			
Name	of the Deputy Contro	ller	Si gnat	ure of the Deputy Controller			
l h fill	ave conducted 5% rand ed correctly as per i	lom checking of the OMR sheet of nstructions.	the said examination	n and found that particulars have been			
Name	of the Controller		Si gnat	ure of the Controller			

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Course : 145 / ELECTRONICS MECHANIC Class: Fourth 99971 / TRADE THEORY Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 89219260115076 | DARSHDEEP SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Course : 150 / CUTTING & SEWING Class: Second 99977 / EMPLOYABILITY SKILLS Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88247161117024 | BEANT KAUR Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Course : 151 / EMBROIDERY AND NEEDLE WORK Class: Second 99941 / TRADE THEORY Subject: Name Of the Student | Answer Sheet No. S.No Student's Sign. Regd. No. 88249160216063 | SWARNJIT KAUR Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Course : 151 / EMBROIDERY AND NEEDLE WORK Class: Second 99977 / EMPLOYABILITY SKILLS Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88104560214153 | GURPREET KAUR Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Course : 165 / HAIR & SKIN CARE Class: First 99921 / TRADE THEORY Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88239160217070 | SHAINA BANSAL Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Course : 165 / HAIR & SKIN CARE Class: First 99966 / EMPLOYABILITY SKILLS Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88239160217070 | SHAINA BANSAL Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator

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Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

Class: First

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

175 / CUTTING SEW. & EMB. TEACHER'S TRAINING

Course:

Subject: 17511 / PRINCIPLE OF EDUCATION

Center Name:

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175160217074	JANITA KUMARI	<u> </u>	<u> </u>
2	88175160217076	BHUPINDER KAUR	<u> </u>	L
3	88175160217077	GAGANDEEP KAUR	<u> </u>	L
4	88175160217079	GURPREET KAUR	<u> </u>	L
5	88175160217081	GURJOT KAUR	<u> </u>	L
6	88175160217082	GURSHARAN KAUR	<u> </u>	L
7	88175160217084	HARDEEP KAUR	<u> </u>	L
8	88175160217085	HARPREET KAUR	<u> </u>	L
9	88175160217087	JASVIR KAUR	<u> </u>	L
10	88175160217090	KIRANJEET KAUR	<u> </u>	L
11	88175160217091	KULWINDER KAUR	<u> </u>	L
12	88175160217095	MANPREET KAUR	<u> </u>	L
13	88175160217097	MANJU BALA	<u> </u>	L
14	88175160217098	MANPREET KAUR	<u> </u>	L
15	88175160217099	NAVREET KAUR	<u> </u>	L
16	88175160217100	PARMINDER KAUR	<u> </u>	L
17	88175160217102	POOJA	<u> </u>	<u> </u>
18	88175160217104	RAMANDEEP KAUR	<u> </u>	<u> </u>
19	88175160217105	RANVEER KAUR	<u> </u>	<u></u>
20	88175160217106	RITU BALA	<u> </u>	<u></u>
21	88175160217107	RUPA RANI	<u> </u>	<u> </u>
				

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 2 of Center Name:

2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 175 / CUTTING SEW. & EMB. TEACHER'S TRAINING

Class: First 17511 / PRINCIPLE OF EDUCATION Subject:

S.No Name Of the Student Regd. No. Answer Sheet No. 88175160217108₁SHIKHA 23 88175160217109 | SARBJEET KAUR

88175160217110 | SURIYA 88175160217113 VARINDERJEET KAUR 25

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 175 / CUTTING SEW. & EMB. TEACHER'S TRAINING

Class: First

Subject: 17512 / TRADE THEORY

Name of the Controller

5.N0	Rega. No.	Name Of the Student	Answer Sheet No.	Student's Sign.		
1	88175160217107	RUPA RANI	<u> </u>			
2				1		
Tot	Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge					
			Undertaki ng			
have	I (Name) hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.					
			Si gnat	cure of the Invigilator		
l ha fill	ive conducted 20% rand ed correctly as per i	lom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been		
Name	e of the Superintenden	t	Si gnat	cure of the Superintendent		
l ha fill	ive conducted 10% rand ed correctly as per i	lom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been		
Name	e of the Deputy Contro	ller	Si gnat	cure of the Deputy Controller		
l h fill	nave conducted 5% rand ed correctly as per i	lom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been		

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Course : 175 / CUTTING SEW. & EMB. TEACHER'S TRAINING Class: First 17513 / PRACTICE OF TEACHING Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88175160217076 | BHUPINDER KAUR Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Course : 175 / CUTTING SEW. & EMB. TEACHER'S TRAINING Class: First 17525 / PRACTICAL IV-A (MEN GARMENTS) Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88175160217076 | BHUPINDER KAUR Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been

Signature of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 1

filled correctly as per instructions.

Name of the Controller

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Course : 175 / CUTTING SEW. & EMB. TEACHER'S TRAINING Class: First 17526 / PRACTICAL IV-B (WOMEN GARMENTS) Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88175160217076 | BHUPINDER KAUR Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been

Signature of the Deputy Controller

Signature of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

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Name of the Deputy Controller

Name of the Controller

filled correctly as per instructions.

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Course : 175 / CUTTING SEW. & EMB. TEACHER'S TRAINING Class: First 17527 / PRACTICAL IV-C (CHILD. GARMENTS) Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88175160217076 | BHUPINDER KAUR Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been

Signature of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 1

filled correctly as per instructions.

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Course : 175 / CUTTING SEW. & EMB. TEACHER'S TRAINING Class: First 17528 / SCHEME WORK Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88175160217076 | BHUPINDER KAUR Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 202 / FASHION TECHNOLOGY Class: Second

Subject: 99977 / EMPLOYABILITY SKILLS

Name of the Controller

PAGE: 1

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88246160217124 | KIRANDEEP KAUR 88246161017007 | JASWINDER KAUR 2 3 88246161017015 | PARMINDER KAUR 88246161017016 | RITIKA GOYAL Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 222 / COMP. OP. PROGRAM. ASSISTANT

Class: Second

Subject: 99941 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88242160117254	KAMALDEEP SINGH	<u> </u>	<u></u>
2	88242160217137	JAMANJOT KAUR	<u> </u>	L
3	88242160217141	HARJEET KAUR	<u> </u>	<u> </u>
4	88242160217154	JMANISHA DUBEY	<u> </u>	<u> </u>
5	88242160217178	_J TANIYA NAGPAL	<u> </u>	<u> </u>
6	88242160217179	TWINKLE KAUR	<u> </u>	<u> </u>
7	88242160917024	HARPREET KUMAR	<u></u>	L
8	88242160917025	HARSHDEEP SINGH	<u> </u>	<u> </u>
9	88242160917040	JMOHD YASEEN	<u> </u>	<u> </u>
10	88242160917044	PAWANDEEP KAUR	<u> </u>	<u> </u>
11	88242160917060	TARANJEET SINGH	<u> </u>	<u> </u>
12	88242161017033	PARMINDER SINGH	<u> </u>	<u> </u>
13	88242161116195	PARDEEP KAUR	<u> </u>	<u> </u>
14	88242161117042	JAMANDEEP KAUR	<u> </u>	<u> </u>
15 	88242161117050	GURPREET KAUR	<u> </u>	<u> </u>
16	88242161117053	GURPREET SINGH	<u></u>	<u> </u>
· -			·	

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 222 / COMP. OP. PROGRAM. ASSISTANT Class: Second

Subject: 99941 / TRADE THEORY

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Course : 222 / COMP. OP. PROGRAM. ASSISTANT Class: Second 99945 / TRADE PRACTICAL Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88242161117060 | SUKHWINDERJIT SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Center Name:

222 / COMP. OP. PROGRAM. ASSISTANT

Course: Class: Second

Subject: 99977 / EMPLOYABILITY SKILLS

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88242160217141	HARJEET KAUR	<u> </u>	<u> </u>
2	88242160217146	JASLEEN KAUR	<u> </u>	<u> </u>
3	88242160217154	MANISHA DUBEY	<u> </u>	L
4	88242160217179	TWINKLE KAUR	<u> </u>	L
5	88242160916037	BALPREET SINGH	<u> </u>	L
6	88242160917018	CHARANPREET SINGH	<u> </u>	L
7	88242160917030	INDERJEET SINGH	<u> </u>	L
8	88242160917040	MOHD YASEEN		<u> </u>
9	88242160917044	PAWANDEEP KAUR		L
10	88242160917049	RUPINDER KAUR		<u> </u>
11	88242160917060	TARANJEET SINGH		
12	88242161017033	PARMINDER SINGH		
13	88242161017043	VIKAS		
14	88242161117042	AMANDEEP KAUR		
15	88242161117053	GURPREET SINGH		
16	'	SUKHWINDERJIT SINGH	 	I
				

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 222 / COMP. OP. PROGRAM. ASSISTANT Class: Second

Subject: 99977 / EMPLOYABILITY SKILLS

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course:

264 / Computer Hardware and Network Maintenance Class: First

Subject: 99912 / WORKSHOP CAL. & SCIENCE

5.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.		
 	88264161017056	RASJOT SINGH	<u> </u>	L		
<u>)</u>	88264161017058	SHUBHAM TIWARI	L	L		
3	88264161017059	MUKESH GIRI	<u> </u>	L		
То	Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge					
			Undertaki ng			
I (I abov have here	I (Name) hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.					
			Si gnati	ure of the Invigilator		
l ha	ave conducted 20% rand led correctly as per i	om checking of the OMR sheet of nstructions.	the said examination	n and found that particulars have been		
Name	e of the Superintenden	t	Si gnati	ure of the Superintendent		
l ha	ave conducted 10% rand led correctly as per i	om checking of the OMR sheet of nstructions.	the said examination	n and found that particulars have been		
Name	e of the Deputy Contro	ller	Si gnati	ure of the Deputy Controller		
l l	nave conducted 5% rand Led correctly as per i	om checking of the OMR sheet of nstructions.	the said examination	n and found that particulars have been		
Name	e of the Controller		Si gnati	ure of the Controller		

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

264 / Computer Hardware and Network Maintenance

Course: Class: First

Subject: 99913 / ENGINEERING DRAWING

S.No		Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.			
1		88264161017056	RASJOT SINGH		L			
2					<u></u>			
3			NAUKEOU OIDI		L			
To	Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaking							
abo hav	e api	xamination as Inv peared under my s	(Designation) igilator. I have personally che upervision in today's exam, hav any mistakes are found, I will	ecked and ensured that we been filled and sha	nereby certify that I have conducted the t particulars of all the students who aded correctly in the OMR sheets. I also any remuneration.			
				Si gnat	ture of the Invigilator			
l h fil	ave o	conducted 20% rand correctly as per	dom checking of the OMR sheet o instructions.	of the said examination	on and found that particulars have been			
Nan	ne of	the Superintende	nt	Si gnat	ture of the Superintendent			
l h fil	ave of	conducted 10% rand correctly as per	dom checking of the OMR sheet o instructions.	of the said examination	on and found that particulars have been			
Nan	ne of	the Deputy Contr	oller	Si gnat	ture of the Deputy Controller			
l fi l	have Led (conducted 5% rand correctly as per	dom checking of the OMR sheet o instructions.	of the said examination	on and found that particulars have been			
Nan	ne of	the Controller		Si gnat	ture of the Controller			

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Course: 275 / AUTOMOTIVE BODY REPAIR Class: Second 27513 / ENGINEERING DRAWING Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88266260115061 | JAGDEEP SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Course : 275 / AUTOMOTIVE BODY REPAIR Class: First 99911 / Trade Theory Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88266160116049 | NAVDEEP SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 275 / AUTOMOTIVE BODY REPAIR

Class: First

Subject: 99912 / WORKSHOP CAL. & SCIENCE

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.		
1	88266160117100	GAGANDEEP SINGH	<u> </u>	<u> </u>		
2	88266160117101	JGURSEWAK SINGH	L			
3	88266160117103	JASKARAN SINGH	<u> </u>	L		
4	88266160117104	JASPREET SINGH		L		
5	88266160117105	JKULJEET SINGH		L		
6	88266160117106	LAKHVEER SINGH SOHAL		1		
I (N	Name and Signature Of Incharge Undertaking I (Name) hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.					
here	by undertake that if	any mistakes are found, I will i				
l ha fill	ve conducted 20% randed correctly as per i	dom checking of the OMR sheet of nstructions.	9	ure of the Invigilator n and found that particulars have been		
Name	e of the Superintender	nt	Si gnat	ure of the Superintendent		
l ha fill	I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.					
Name	e of the Deputy Contro	oller	Si gnat	ure of the Deputy Controller		
l h fill	ave conducted 5% rand ed correctly as per i	dom checking of the OMR sheet of nstructions.	the said examinatio	n and found that particulars have been		
Name	e of the Controller		Si gnat	ure of the Controller		

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 1 of 1 Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

275 / AUTOMOTIVE BODY REPAIR

Course: Class: First

Subject: 99913 / ENGINEERING DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.			
1	88266160117100	GAGANDEEP SINGH	<u> </u>				
2	88266160117101						
3	88266160117103	JASKARAN SINGH					
4	88266160117104	JASPREET SINGH					
5	88266160117105	KULJEET SINGH					
6	88266160117106						
	Name and Signature Of Incharge Undertaking I (Name) hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.						
here	by undertake that if	any mistakes are found, I will					
l ha fill	Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have beer filled correctly as per instructions.						
Name	of the Superintender	nt	Si gna	ture of the Superintendent			
l ha fill	I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have beer filled correctly as per instructions.						
Name	of the Deputy Contro	oller	Si gna	ture of the Deputy Controller			
l h	ave conducted 5% ranc ed correctly as per i	dom checking of the OMR sheet of nstructions.	the said examinati	on and found that particulars have been			
Name	of the Controller		Si gna	ture of the Controller			

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Course : 275 / AUTOMOTIVE BODY REPAIR Class: First 99966 / EMPLOYABILITY SKILLS Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88266160116049 | NAVDEEP SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 275 / AUTOMOTIVE BODY REPAIR

Class: Second

Subject: 99931 / TRADE THEORY

S.N	o	Regd. No.		Name Of the Student		Answer Sheet No.	Student's Sign.	
1		88266160117	114 SA	ANDEEP SINGH		<u> </u>		
2								
3				A CLU IVIII AA D. CUIDTA				
	Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge							
I al ha he	Undertaking I (Name) hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.					nereby certify that I have conducted the t particulars of all the students who aded correctly in the OMR sheets. I also any remuneration.		
						Si gna	ture of the Invigilator	
l fi	ha i I I	ve conducted 20% ed correctly as p	random c er instr	hecking of the OMR sheet uctions.	t of	the said examination	on and found that particulars have been	
Na	ame	of the Superinte	endent			Si gna	ture of the Superintendent	
l fi	ha i I I	ve conducted 10% ed correctly as p	random c er instr	hecking of the OMR sheet uctions.	t of	the said examination	on and found that particulars have been	
Na	ame	of the Deputy Co	ontroller			Si gna	ture of the Deputy Controller	
f	l h	ave conducted 5% ed correctly as p	random c er instr	hecking of the OMR sheet uctions.	t of	the said examination	on and found that particulars have been	
Na	ame	of the Controlle	er			Si gna	ture of the Controller	

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 275 / AUTOMOTIVE BODY REPAIR

Class: Second

Subject: 99933 / ENGINEERING DRAWING

Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.			
88266160116055	SHUBHAM DHAND	<u> </u>	<u> </u>			
88266160117106	LAKHVEER SINGH SOHAL	<u> </u>				
88266160117107	LOVEPREET SINGH	L	L			
88266160117111	RAJANDEEP SINGH	L	L			
88266160117113	_] SAHIL	L	L			
88266160117114	SAJANDEEP SINGH		<u> </u>			
Name and Signature Of Incharge Undertaking I (Name) hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who						
by undertake that if	any mistakes are found, I will					
ve conducted 20% rand ed correctly as per i	dom checking of the OMR sheet of instructions.	· ·	rure of the Invigilator on and found that particulars have been			
of the Superintender	nt	Si gnat	ture of the Superintendent			
I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have b filled correctly as per instructions.						
of the Deputy Contro	oller	Si gnat	rure of the Deputy Controller			
ave conducted 5% rand ed correctly as per i	dom checking of the OMR sheet of instructions.	the said examinatio	on and found that particulars have been			
of the Controller		Si gnat	ure of the Controller			
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PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 of ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA 276 / AUTOMOTIVE PAINT TECHNICIAN Course : Class: Second 27611 / TRADE THEORY Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88267260115083 | YASH JAISWAL Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Course : 276 / AUTOMOTIVE PAINT TECHNICIAN Class: First 99911 / Trade Theory Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88267160117124 | GAUTAM KUMAR Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Center Name:

276 / AUTOMOTIVE PAINT TECHNICIAN Course :

Class: First

99912 / WORKSHOP CAL. & SCIENCE Subject:

PAGE: 1 of

Name of the Controller

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88267160117135 | PARMINDER SINGH 88267160117138 | SATNAM SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

276 / AUTOMOTIVE PAINT TECHNICIAN

Course : Class: First

99913 / ENGINEERING DRAWING Subject:

PAGE: 1 of

Name of the Controller

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88267160117135 | PARMINDER SINGH 88267160117138 | SATNAM SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Course : 276 / AUTOMOTIVE PAINT TECHNICIAN Class: First 99966 / EMPLOYABILITY SKILLS Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88267160117124 | GAUTAM KUMAR Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA 276 / AUTOMOTIVE PAINT TECHNICIAN Course : Class: Second 99931 / TRADE THEORY Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88267160117138 | SATNAM SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Course : 276 / AUTOMOTIVE PAINT TECHNICIAN Class: Second 99932 / WORKSHOP CAL. & SCIENCE Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88267160117138 | SATNAM SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

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

Name of the Deputy Controller Signature of the Deputy Controller

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

Name of the Controller Signature of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 1 of 1 Center Name :

2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 276 / AUTOMOTIVE PAINT TECHNICIAN

Class: Second

Subject: 99933 / ENGINEERING DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.	
1	88267160117127	JAGPREET SINGH			
2	88267160117128	JASDEEP SINGH	<u> </u>		
3	88267160117129	KUNDAN GIRI			
4	88267160117130	LOVEJEET SINGH			
5 	88267160117133	NAZEER MOHAMMAD			
6	88267160117134	NAVNEET PAL SINGH			
7	88267160117136	RAJMEEN KHAN			
8	88267160117138	SATNAM SINGH			
Tota	al No. Of Students in al No. Of Answer She ne and Signature Of	eets Packed >	sent:		
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Name of the Superintendent Signature of the Superintendent				ture of the Superintendent	
I have conducted 10% random checking of the OMR sheet of the said examina filled correctly as per instructions.			the said examinati	on and found that particulars have been	
Name	of the Deputy Contro	ller	Si gna	ture of the Deputy Controller	
l ha fille	ave conducted 5% rand ed correctly as per i	lom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been	
Name	of the Controller		Si gna	ture of the Controller	

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA 276 / AUTOMOTIVE PAINT TECHNICIAN Course : Class: Second 99977 / EMPLOYABILITY SKILLS Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88267160117138 | SATNAM SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2116 / INDUSTRIAL TRAINING INSTITUTE, MANUKE

Course: 113 / MECH. DIESEL Class: First

Subject: 99912 / WORKSHOP CAL. & SCIENCE

PAGE: 1 of

Name of the Controller

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88201160617023 | JASDEEP SINGH 88201160617036 | SANDEEP SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2116 / INDUSTRIAL TRAINING INSTITUTE, MANUKE

Course: 113 / MECH. DIESEL Class: First

Subject: 99913 / ENGINEERING DRAWING

Name of the Controller

PAGE: 1 of

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88201160617023 | JASDEEP SINGH 88201160617036 | SANDEEP SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2116 / INDUSTRIAL TRAINING INSTITUTE, MANUKE Course : 113 / MECH. DIESEL Class: Second 99933 / ENGINEERING DRAWING Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88017260614227 | DUSTDAMAN SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2116 / INDUSTRIAL TRAINING INSTITUTE, MANUKE Course : 113 / MECH. DIESEL Class: Second 99935 / TRADE PRACTICAL Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88201160617023 | JASDEEP SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

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

Name of the Deputy Controller Signature of the Deputy Controller

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

Name of the Controller Signature of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2116 / INDUSTRIAL TRAINING INSTITUTE, MANUKE

Course: 119 / CARPENTER Class: Second

Subject: 99931 / TRADE THEORY

PAGE: 1 of

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88206160617044 | AKBAL SINGH 88206160617047 | GURDEEP SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller

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

Signature of the Controller

Name of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2116 / INDUSTRIAL TRAINING INSTITUTE, MANUKE

Course: 126 / MECH. MOTOR VEHICLE Class: First

Subject: 99911 / Trade Theory

<u>ک</u>	No.	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.	
1		88215260617074	GURPREET SINGH	<u> </u>		
2		88215260617083				
3		88215260617119	DALJIT SINGH	<u>[</u>		
	Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge					
				Undertaki ng		
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				Si gnati	ure of the Invigilator	
	l ha fill	ive conducted 20% rand ed correctly as per i	om checking of the OMR sheet of nstructions.	the said examination	n and found that particulars have been	
	Name	e of the Superintenden	t	Si gnati	ure of the Superintendent	
	l ha fill	ive conducted 10% rand ed correctly as per i	om checking of the OMR sheet of nstructions.	the said examination	n and found that particulars have been	
	Name	e of the Deputy Contro	ller	Si gnati	ure of the Deputy Controller	
	l h fill	nave conducted 5% rand ed correctly as per i	om checking of the OMR sheet of nstructions.	the said examination	n and found that particulars have been	
	Name	e of the Controller		Si gnati	ure of the Controller	

1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2116 / INDUSTRIAL TRAINING INSTITUTE, MANUKE

Course: 126 / MECH. MOTOR VEHICLE Class: First

Subject: 99912 / WORKSHOP CAL. & SCIENCE

PAGE: 1

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88215260617074 | GURPREET SINGH 2 88215260617078 | JAGDEEP SINGH 3 88215260617119 | DALJIT SINGH 88215260617129 | PARAMVEER SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Signature of the Controller

Name of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2116 / INDUSTRIAL TRAINING INSTITUTE, MANUKE

126 / MECH. MOTOR VEHICLE

Course: Class: First

Subject: 99913 / ENGINEERING DRAWING

Š.	.No Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.			
1	88215260617074	GURPREET SINGH		<u> </u>			
2				L			
3				L			
4	88215260617129	PARAMVEER SINGH		L			
	Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge						
			Undertaki ng				
	I (Name) hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.						
			Si gnat	ure of the Invigilator			
	I have conducted 20% randfilled correctly as per	dom checking of the OMR sheet of instructions.	the said examinatio	n and found that particulars have been			
	Name of the Superintende	nt	Si gnat	ure of the Superintendent			
	I have conducted 10% randfilled correctly as per	dom checking of the OMR sheet of instructions.	the said examinatio	n and found that particulars have been			
	Name of the Deputy Contr	oller	Si gnat	ure of the Deputy Controller			
	I have conducted 5% rangerilled correctly as per	dom checking of the OMR sheet of instructions.	the said examinatio	n and found that particulars have been			
	Name of the Controller		Si gnat	ure of the Controller			

1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2116 / INDUSTRIAL TRAINING INSTITUTE, MANUKE

Course: 126 / MECH. MOTOR VEHICLE Class: First

Subject: 99966 / EMPLOYABILITY SKILLS

PAGE: 1 of

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88215260617074 | GURPREET SINGH 88215260617083 | RAJWINDER SINGH 3 88215260617119 | DALJIT SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Controller Signature of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2116 / INDUSTRIAL TRAINING INSTITUTE, MANUKE Course : 126 / MECH. MOTOR VEHICLE Class: Second 99931 / TRADE THEORY Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88215360615001 | DAVINDER SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2116 / INDUSTRIAL TRAINING INSTITUTE, MANUKE

Course: 126 / MECH. MOTOR VEHICLE Class: Third

Subject: 99951 / TRADE THEORY

Cubject .	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	THE SICH		
S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88215260617071	BALJINDER SINGH	<u> </u>	<u> </u>
2	88215260617073	GURPREET SINGH	<u> </u>	<u> </u>
3	88215260617076	HARMANPREET SINGH	<u> </u>	<u> </u>
4	88215260617077	HARPREET SINGH	<u> </u>	<u> </u>
5	88215260617085	SHAMSHER SINGH	L	L
6	88215260617086	SIMARJEET SINGH	L	L
7	88215260617087	SUNPREET SINGH SANDHI	<u> </u>	<u> </u>
8	88215260617088	VARINDER	<u> </u>	<u> </u>
9	88215260617089	DIMPY SOLANKI	L	L
10 <u> </u>	88215260617113	ANMOLDEEP SINGH	L	L
11	88215260617114	ARSHDEEP SINGH	L	L
12	88215260617115	BALJINDER SINGH	L	L
13	88215260617116	BARINDER SINGH	<u> </u>	L
14	88215260617117	BOOTA SINGH	<u> </u>	L
15	88215260617118	CAPTAN SINGH	 L	<u></u>
16	88215260617123	JAGDEEP SINGH	<u> </u>	<u></u>
17 <u> </u>	88215260617124	JASPREET SINGH	<u> </u>	<u></u>
18	88215260617126	JATINDER KUMAR		
19	88215260617128	NARINDER SINGH	 	
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PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING
PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT
Center Name: 2116 / INDUSTRIAL TRAINING INSTITUTE, MANUKE
Course: 126 / MECH. MOTOR VEHICLE Class: Third
Subject: 99951 / TRADE THEORY

Total No. Of Students in this Subject > Present: Absent:
Total No. Of Answer Sheets Packed >
Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2116 / INDUSTRIAL TRAINING INSTITUTE, MANUKE

Course: 126 / MECH. MOTOR VEHICLE Class: Third

Subject: 99952 / WORKSHOP CAL. & SCIENCE

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88215260617071	BALJINDER SINGH	<u> </u>	<u> </u>
2	88215260617073	GURPREET SINGH	<u> </u>	<u> </u>
3	88215260617076	HARMANPREET SINGH	<u> </u>	<u> </u>
4	88215260617077	HARPREET SINGH	<u> </u>	<u> </u>
5	88215260617085	SHAMSHER SINGH	<u> </u>	<u>L</u>
6	88215260617086	SIMARJEET SINGH	<u> </u>	<u> </u>
7	88215260617087	SUNPREET SINGH SANDHI	<u> </u>	<u> </u>
8	88215260617088	VARINDER		<u> </u>
9	88215260617089	DIMPY SOLANKI	<u> </u>	<u> </u>
10	88215260617113	ANMOLDEEP SINGH	<u> </u>	<u> </u>
11	88215260617114	ARSHDEEP SINGH	<u> </u>	<u> </u>
12	88215260617115	BALJINDER SINGH	<u> </u>	<u> </u>
13	88215260617116	BARINDER SINGH	<u> </u>	<u> </u>
14	88215260617117	BOOTA SINGH	<u> </u>	<u> </u>
15	88215260617118	CAPTAN SINGH	<u> </u>	<u> </u>
16	88215260617123	JAGDEEP SINGH	<u> </u>	<u> </u>
17	88215260617124	JASPREET SINGH		L
18	88215260617126	JATINDER KUMAR	<u></u>	<u> </u>
19	88215260617128	NARINDER SINGH		

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING
PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS - SCVT
Center Name: 2116 / INDUSTRIAL TRAINING INSTITUTE, MANUKE
Course: 126 / MECH. MOTOR VEHICLE Class: Third
Subject: 99952 / WORKSHOP CAL. & SCIENCE

Total No. Of Students in this Subject > Present: Absent:
Total No. Of Answer Sheets Packed >
Name and Signature Of Incharge

Undertaking

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been

filled correctly as per instructions.

Name of the Controller Signature of the Controller

Name of the Deputy Controller

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2116 / INDUSTRIAL TRAINING INSTITUTE, MANUKE

Course: 126 / MECH. MOTOR VEHICLE Class: Third

Subject: 99953 / ENGINEERING DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88215260617071	BALJINDER SINGH	<u> </u>	L
2	88215260617073	GURPREET SINGH	<u> </u>	L
3	88215260617076	HARMANPREET SINGH	<u> </u>	L
4	88215260617077	HARPREET SINGH	<u> </u>	L
5	88215260617085	SHAMSHER SINGH	<u> </u>	L
6	88215260617086	SIMARJEET SINGH	<u> </u>	L
7	88215260617087	SUNPREET SINGH SANDHI	<u> </u>	L
8	88215260617088	VARINDER	<u> </u>	L
9	88215260617089	DIMPY SOLANKI	<u> </u>	L
10	88215260617113	ANMOLDEEP SINGH	<u> </u>	L
11	88215260617114	ARSHDEEP SINGH	<u> </u>	L
12	88215260617115	BALJINDER SINGH	<u> </u>	L
13	88215260617116	BARINDER SINGH	<u> </u>	L
14	88215260617117	BOOTA SINGH	<u> </u>	L
15	88215260617118	CAPTAN SINGH	<u> </u>	L
16	88215260617123	JAGDEEP SINGH	<u> </u>	L
17 	88215260617124	JASPREET SINGH	<u> </u>	L
18	88215260617126	JATINDER KUMAR	<u> </u>	
19	88215260617128	NARINDER SINGH		
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PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2116 / INDUSTRIAL TRAINING INSTITUTE MANUKE Course: 126 / MECH. MOTOR VEHICLE Class: Third 99953 / ENGINEERING DRAWING Subject: Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2116 / INDUSTRIAL TRAINING INSTITUTE, MANUKE

Subject: 99955 / TRADE PRACTICAL

Course: 126 / MECH. MOTOR VEHICLE Class: Third

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88215260617071	BALJINDER SINGH	<u> </u>	<u> </u>
2	88215260617073	GURPREET SINGH	<u> </u>	<u> </u>
3	88215260617076	HARMANPREET SINGH	<u> </u>	<u> </u>
4	88215260617077	HARPREET SINGH	<u> </u>	<u></u>
5	88215260617085	SHAMSHER SINGH	<u> </u>	L
6	88215260617086	SIMARJEET SINGH	<u> </u>	L
7	88215260617087	SUNPREET SINGH SANDHI	<u> </u>	L
8	88215260617088	VARINDER	<u> </u>	<u></u>
9	88215260617089	DIMPY SOLANKI	<u> </u>	<u></u>
10	88215260617113	ANMOLDEEP SINGH	<u> </u>	<u></u>
11	88215260617114	ARSHDEEP SINGH	<u> </u>	<u></u>
12	88215260617115	BALJINDER SINGH	<u> </u>	<u></u>
13	88215260617116	BARINDER SINGH	<u> </u>	<u></u>
14	88215260617117	BOOTA SINGH	<u> </u>	<u></u>
15 	88215260617118	CAPTAN SINGH	<u> </u>	<u></u>
16	88215260617123	JAGDEEP SINGH	<u> </u>	<u></u>
17 	88215260617124	JASPREET SINGH	<u> </u>	
18	88215260617126	JATINDER KUMAR	<u> </u>	<u> </u>
19	88215260617128	NARINDER SINGH		
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PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2116 / INDUSTRIAL TRAINING INSTITUTE, MANUKE Course: 126 / MECH. MOTOR VEHICLE Class: Third 99955 / TRADE PRACTICAL Subject: Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

Center Name: 2116 / INDUSTRIAL TRAINING INSTITUTE, MANUKE Course : 143 / DRAUGHTSMAN (CIVIL) Class: First 99911 / Trade Theory Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88217360615062 | SUKHCHAIN SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been

Signature of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 1

No.Of Students On This Page >> Present>> Absent >> Name Of Invigilator Signature Of Invigilator

filled correctly as per instructions.

Name of the Controller

Center Name: 2116 / INDUSTRIAL TRAINING INSTITUTE, MANUKE Course : 143 / DRAUGHTSMAN (CIVIL) Class: First 99912 / WORKSHOP CAL. & SCIENCE Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88217360615062 | SUKHCHAIN SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

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

Name of the Controller

Name of the Deputy Controller

PAGE: 1

Signature of the Controller

Signature of the Deputy Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2116 / INDUSTRIAL TRAINING INSTITUTE, MANUKE

Course : 143 / DRAUGHTSMAN (CIVIL)

Class: First

99915 / TRADE PRACTICAL Subject:

Name of the Controller

PAGE: 1 of

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88217260616095 | MANGAT SINGH 88217260617106 | PRABHJOT SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2116 / INDUSTRIAL TRAINING INSTITUTE, MANUKE Course : 143 / DRAUGHTSMAN (CIVIL) Class: First 99966 / EMPLOYABILITY SKILLS Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88217360615062 | SUKHCHAIN SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2116 / INDUSTRIAL TRAINING INSTITUTE, MANUKE

Course: 143 / DRAUGHTSMAN (CIVIL) Class: Third

Subject: 99951 / TRADE THEORY

PAGE: 1

Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
88217260617092	ARSHDIP SINGH		
88217260617093	JBALKARAN SINGH	<u> </u>	L
88217260617095	JGURMEET SINGH	<u> </u>	L
88217260617096	HARPREET SINGH	<u> </u>	L
88217260617097	HARVINDER SINGH UPPAL	<u> </u>	L
88217260617098	HARMEET SINGH	<u> </u>	L
88217260617099	KAMALJEET SINGH	<u> </u>	L
88217260617100	KARAMJEET KAUR	<u> </u>	L
88217260617101	KARANVEER SINGH	<u> </u>	L
88217260617102	KULWINDER SINGH	<u> </u>	L
88217260617105	PARMINDER SINGH DHILL(<u> </u>	L
88217260617110	SIMRANJEET SINGH		<u> </u>
88217260617111	DHEERAJ KUMAR	<u> </u>	
88217260617112	SIMRANJIT SINGH	<u></u>	L
	88217260617092 88217260617095 88217260617096 88217260617097 88217260617099 88217260617100 88217260617101 88217260617102 88217260617110 88217260617110	Name Of the Student 88217260617092 ARSHDIP SINGH 88217260617093 BALKARAN SINGH 88217260617095 GURMEET SINGH 88217260617096 HARPREET SINGH 88217260617097 HARVINDER SINGH UPPAL 88217260617099 KAMALJEET SINGH 88217260617099 KAMALJEET SINGH 88217260617100 KARAMJEET KAUR 88217260617101 KARANVEER SINGH 88217260617102 KULWINDER SINGH 88217260617105 PARMINDER SINGH 88217260617110 SIMRANJEET SINGH 88217260617110 SIMRANJEET SINGH 88217260617111 DHEERAJ KUMAR 88217260617111 DHEERAJ KUMAR 88217260617112 SIMRANJIT SINGH	88217260617092 ARSHDIP SINGH 88217260617093 BALKARAN SINGH 88217260617095 GURMEET SINGH 88217260617096 HARPREET SINGH 88217260617097 HARVINDER SINGH UPPAL 88217260617098 HARMEET SINGH 88217260617099 KAMALJEET SINGH 88217260617100 KARAMJEET KAUR 88217260617101 KARANVEER SINGH 88217260617102 KULWINDER SINGH DHILL(88217260617110 SIMRANJEET SINGH 88217260617110 SIMRANJEET SINGH 88217260617110 SIMRANJEET SINGH 88217260617111 DHEERAJ KUMAR

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

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2116 / INDUSTRIAL TRAINING INSTITUTE, MANUKE Course: 143 / DRAUGHTSMAN (CIVIL) Class: Third Subject: 99951 / TRADE THEORY Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent

Name of the Deputy Controller

filled correctly as per instructions.

Signature of the Deputy Controller

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

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been

Name of the Controller

2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2116 / INDUSTRIAL TRAINING INSTITUTE, MANUKE

Course: 143 / DRAUGHTSMAN (CIVIL) Class: Third

Subject: 99952 / WORKSHOP CAL. & SCIENCE

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88217260617092	JARSHDIP SINGH	<u> </u>	<u></u>
2	88217260617093	BALKARAN SINGH	L	L
3	88217260617095	GURMEET SINGH	L	L
4	88217260617096	HARPREET SINGH	<u> </u>	L
5	88217260617097	HARVINDER SINGH UPPAL	<u> </u>	L
6	88217260617098	HARMEET SINGH	<u> </u>	L
7	88217260617099	KAMALJEET SINGH	<u> </u>	L
8	88217260617100	KARAMJEET KAUR	<u> </u>	L
9	88217260617101	KARANVEER SINGH	<u> </u>	L
10	88217260617102	KULWINDER SINGH	<u> </u>	L
11	88217260617105	PARMINDER SINGH DHILL(<u> </u>	L
12	88217260617110	SIMRANJEET SINGH		
13	88217260617111	DHEERAJ KUMAR		<u></u>
14	88217260617112	SIMRANJIT SINGH		

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2116 / INDUSTRIAL TRAINING INSTITUTE, MANUKE Course: 143 / DRAUGHTSMAN (CIVIL) Class: Third Subject: 99952 / WORKSHOP CAL. & SCIENCE Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) ____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been

filled correctly as per instructions.

Signature of the Invigilator

Name of the Superintendent Signature of the Superintendent

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

Name of the Deputy Controller Signature of the Deputy Controller

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

Name of the Controller Signature of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2116 / INDUSTRIAL TRAINING INSTITUTE, MANUKE

Course: 143 / DRAUGHTSMAN (CIVIL)

Class: Third

Subject: 99955 / TRADE PRACTICAL

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88217260617092	ARSHDIP SINGH	<u> </u>	<u></u>
2	88217260617093	BALKARAN SINGH	L	L
3	88217260617095	GURMEET SINGH	<u> </u>	L
4	88217260617096	HARPREET SINGH	<u> </u>	L
5	88217260617097	HARVINDER SINGH UPPAL	<u> </u>	L
6	88217260617098	HARMEET SINGH	<u> </u>	L
7	88217260617099	KAMALJEET SINGH	<u> </u>	L
8	88217260617100	KARAMJEET KAUR	L	L
9	88217260617101	KARANVEER SINGH	L	L
10	88217260617102	KULWINDER SINGH	<u> </u>	L
11	88217260617105	PARMINDER SINGH DHILL(<u> </u>	L
12	88217260617110	SIMRANJEET SINGH	<u> </u>	L
13	88217260617111	DHEERAJ KUMAR	<u> </u>	L
14	88217260617112	SIMRANJIT SINGH	<u> </u>	L

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

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2116 / INDUSTRIAL TRAINING INSTITUTE, MANUKE Course: 143 / DRAUGHTSMAN (CIVIL) Class: Third Subject: 99955 / TRADE PRACTICAL Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) ____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

filled correctly as per instructions.

Name of the Deputy Controller

Name of the Superintendent

Signature of the Deputy Controller

Signature of the Superintendent

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

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been

Name of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 1 of 1 Center Name: 2116 / INDUSTRIAL TRAINING INSTITUTE, MANUKE

Course: 143 / DRAUGHTSMAN (CIVIL) Class: Fourth

Subject: 99971 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88217260616089	ARSHDEEP SINGH	<u> </u>	<u> </u>
2	88217260616090	ASLAM SHER ALI	<u> </u>	<u> </u>
3	88217260616094	KAMALPREET SINGH	<u> </u>	<u> </u>
4	88217260616099	_J RAVI KUMAR	<u> </u>	<u> </u>
5	88217260616101	SATNAM SINGH	<u> </u>	<u> </u>
6	88217260616102	SAWARANDEEP SINGH	<u> </u>	<u> </u>
7	88217260616103	SUKHDEEP SINGH	<u> </u>	<u> </u>
8	88217260616104	SIMRANJIT SINGH		I
Tot	al No. Of Students in al No. Of Answer Sho me and Signature Of		ent.	
			Undertaki ng	
have	appeared under my su	(Designation) gilator. I have personally checupervision in today's exam, have any mistakes are found, I will	been filled and sha	nereby certify that I have conducted the particulars of all the students who aded correctly in the OMR sheets. I also any remuneration.
			Si gnat	ture of the Invigilator
l ha fill	ve conducted 20% rand ed correctly as per i	dom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been
Name	of the Superintender	nt	Si gnat	ture of the Superintendent
l ha fill	ve conducted 10% rand ed correctly as per i	dom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been
Name	of the Deputy Contro	ol I er	Si gnat	ture of the Deputy Controller
	ave conducted 5% rand ed correctly as per i		the said examination	on and found that particulars have been
Name	of the Controller		Si gnat	ture of the Controller

1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 1 of 1 ATTENDANCE CUM
Center Name: 2116 / INDUSTRIAL TRAININ

2116 / INDUSTRIAL TRAINING INSTITUTE, MANUKE

Course: 145 / ELECTRONICS MECHANIC Class: Fourth

Subject: 99973 / ENGINEERING DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88219260616107	BALWINDER SINGH		
2	88219260616108	BHUPINDERJIT SINGH		
3	88219260616112	HARPAL SINGH	<u> </u>	1
4	88219260616115	KARTAR SINGH	<u> </u>	
5		PARGATDEEP SINGH		
6	88219260616122	RAMANDEEP SINGH	<u> </u>	<u> </u>
7	88219260616124	SUKHWINDER SINGH	<u> </u>	1
8	88219260616126	MANINDERPREET SINGH	I	I
Tota	al No. Of Students in al No. Of Answer She ne and Signature Of		ent.	
			Undertaki ng	
have	e examination as Invi appeared under my su	(Designation) gilator. I have personally chec pervision in today's exam, have any mistakes are found, I will	ked and ensured that been filled and sha	nereby certify that I have conducted the t particulars of all the students who aded correctly in the OMR sheets. I also any remuneration.
			Si gna	ture of the Invigilator
l hav fill∈	ve conducted 20% rand ed correctly as per i	lom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been
Name	of the Superintenden	t	Si gna	ture of the Superintendent
l hav fille	ve conducted 10% rand ed correctly as per i	lom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been
Name	of the Deputy Contro	ller	Si gna	ture of the Deputy Controller
l ha fille	ave conducted 5% randed correctly as per i	lom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been
Name	of the Controller		Si gnat	ture of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA Course : 111 / WELDER (GAS AND ELECTRIC) Class: Second 99931 / TRADE THEORY Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88212160517005 | HARVINDER SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS - SCVT

Center Name: 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA

Course: 111 / WELDED (CAS AND ELECTRIC)

Course: 111 / WELDER (GAS AND ELECTRIC) Class: Second

Subject: 99933 / ENGINEERING DRAWING

Name of the Controller

PAGE: 1 of

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88212160517005 | HARVINDER SINGH 88212160717020 | FARVEER SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA

Course: 114 / PLUMBER Class: Second

Subject: 99931 / TRADE THEORY

Name of the Controller

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.		
1	88209160516028	BHAWANJOT SINGH	<u> </u>	<u> </u>		
2	88209160517033	GURDEEP SINGH	<u> </u>	L		
3	88209260515041	GURMANDEEP SINGH	<u> </u>	L		
4	88209260515058	GURBIR SINGH	L	L		
Tot	tal No. Of Students in tal No. Of Answer She me and Signature Of		ent: Undertaki ng			
nave	e appeared under my su	ipervision in today's exam, have	however that been filled and shade	ereby certify that I have conducted the particulars of all the students who ded correctly in the OMR sheets. I also		
here	eby undertake that if	any mistakes are found, I will r				
1 1		lan abaddan af the OMD abaat af	G	ure of the Invigilator		
i na fill	ed correctly as per i	nstructions.	the said examination	n and found that particulars have been		
Name	e of the Superintenden	it	Si gnati	ure of the Superintendent		
l ha fill	I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.					
Name	e of the Deputy Contro	oller	Si gnati	ure of the Deputy Controller		
l h fill	nave conducted 5% rand ed correctly as per i	lom checking of the OMR sheet of nstructions.	the said examination	n and found that particulars have been		

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA

Course: 114 / PLUMBER Class: Second

Subject: 99933 / ENGINEERING DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88209160517024	AMANPREET SINGH	<u> </u>	
2	88209160517030	BHUPINDER SINGH	L	<u></u>
3	88209160517031	CHANDAN KUMAR	L	L
4	88209160517033	GURDEEP SINGH	<u> </u>	<u> </u>
5	88209160517034	GURDEEP SINGH	<u> </u>	<u> </u>
6	88209160517037	GURVIR SINGH	<u> </u>	<u> </u>
7	88209160517039	HARPREET SINGH	<u> </u>	<u> </u>
8	88209160517044	KARAMJEET SINGH	<u> </u>	L
9	88209160517072	TARNTEJ SINGH		
Tot	al No. Of Students in al No. Of Answer She me and Signature Of		ent:	
			Undertaki ng	
I (N abov have here	lame) le examination as Invi lappeared under my su lby undertake that if	(Designation) gilator. I have personally chec pervision in today's exam, have any mistakes are found, I will	h ked and ensured that been filled and sha not be entitled for	ereby certify that I have conducted the particulars of all the students who ded correctly in the OMR sheets. I also any remuneration.
			Si gnat	ure of the Invigilator
	ve conducted 20% rand ed correctly as per i		the said examinatio	n and found that particulars have been
Name	of the Superintender	t	Si gnat	ure of the Superintendent
	ve conducted 10% rand ed correctly as per i		the said examinatio	n and found that particulars have been
Name	of the Deputy Contro	ller	Si gnat	ure of the Deputy Controller
l h fill	ave conducted 5% rand ed correctly as per i	lom checking of the OMR sheet of nstructions.	the said examinatio	n and found that particulars have been
Name	of the Controller		Si gnat	ure of the Controller

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA

Course: 125 / WIREMAN Class: Third

Subject: 99951 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88232260517074	AKASHVIR SINGH	<u> </u>	<u> </u>
2	88232260517075	AMRITPAL SINGH		L
3	88232260517076	JANIL		L
4	88232260517077	AVTAR SINGH		<u> </u>
5 	88232260517079	GURJEET SINGH		<u> </u>
6	88232260517081	GURPREET SINGH		<u> </u>
7	88232260517082	HARPREET SINGH		<u> </u>
8	88232260517083	JASPREET SINGH		<u> </u>
9	88232260517085	LAKHVIR SINGH		<u> </u>
10	88232260517087	NEHRU SINGH		<u> </u>
11	88232260517088	RAJDEEP SINGH		<u> </u>
12	88232260517089	RAVINDER SINGH		<u> </u>
13	88232260517090	RAMANDEEP SINGH		<u> </u>
14	88232260517091	SURINDER SINGH		<u> </u>
15 	88232260517092	TAPPU		
16	88232260517093	_I SATNAMSINGH	I	I

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 PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name : 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA

Course: 125 / WIREMAN Class: Third

Subject: 99951 / TRADE THEORY

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA

Course: 125 / WIREMAN Class: Third

Subject: 99952 / WORKSHOP CAL. & SCIENCE

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88232260517074	AKASHVIR SINGH		
2	88232260517075	AMRITPAL SINGH		
3	88232260517076	ANIL		
4	88232260517077	AVTAR SINGH		
5	88232260517079	GURJEET SINGH		
6	88232260517081	GURPREET SINGH		
7	88232260517082	HARPREET SINGH		L
8	88232260517083	JASPREET SINGH		
9	88232260517085	LAKHVIR SINGH		
10	88232260517087	NEHRU SINGH		
11	88232260517088	RAJDEEP SINGH		<u> </u>
12	88232260517089	RAVINDER SINGH		
13	88232260517090	RAMANDEEP SINGH		<u> </u>
14	88232260517091	SURINDER SINGH		
15	88232260517092	TAPPU		
16	88232260517093	SATNAMSINGH		

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

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA Center Name:

Course: 125 / WIREMAN Class: Third

99952 / WORKSHOP CAL. & SCIENCE Subject:

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA

Course: 125 / WIREMAN Class: Third

Subject: 99953 / ENGINEERING DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88232260517074	JAKASHVIR SINGH	<u> </u>	<u> </u>
2	88232260517075	JAMRITPAL SINGH	<u> </u>	<u> </u>
3	88232260517076	JANIL	<u> </u>	<u> </u>
4	88232260517077	JAVTAR SINGH	<u> </u>	<u> </u>
5	88232260517079	GURJEET SINGH	<u> </u>	<u> </u>
6	88232260517081	GURPREET SINGH	<u> </u>	<u> </u>
7	88232260517082	HARPREET SINGH	<u> </u>	<u> </u>
8	88232260517083	JASPREET SINGH	<u> </u>	<u> </u>
9	88232260517085	LAKHVIR SINGH	<u> </u>	<u> </u>
10	88232260517087	NEHRU SINGH		L
11	88232260517088	RAJDEEP SINGH		L
12	88232260517089	RAVINDER SINGH		L
13	88232260517090	RAMANDEEP SINGH		L
14	88232260517091	SURINDER SINGH		L
15	88232260517092	TAPPU		L
16	88232260517093	SATNAMSINGH		

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 PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2117 / IN

2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA

Course: 125 / WIREMAN Class: Third

Subject: 99953 / ENGINEERING DRAWING

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA

Course: 125 / WIREMAN Class: Third

Subject: 99955 / TRADE PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88232260517074	_J AKASHVIR SINGH		
2	88232260517075	JAMRITPAL SINGH	<u> </u>	<u></u>
3	88232260517076	_] ANIL	<u> </u>	<u></u>
4	88232260517077	JAVTAR SINGH	L	L
5	88232260517079	GURJEET SINGH	L	L
6	88232260517081	GURPREET SINGH	<u> </u>	<u></u>
7	88232260517082	HARPREET SINGH	<u> </u>	L
8	88232260517083	JASPREET SINGH	<u> </u>	<u></u>
9	88232260517085	LAKHVIR SINGH	L	L
10	88232260517087	NEHRU SINGH	L	L
11	88232260517088	RAJDEEP SINGH	<u> </u>	<u></u>
12	88232260517089	RAVINDER SINGH	<u> </u>	<u></u>
13	88232260517090	RAMANDEEP SINGH	<u> </u>	<u></u>
14	88232260517091	SURINDER SINGH	<u> </u>	<u></u>
15 	88232260517092	_J TAPPU	L	L
16 	88232260517093	SATNAMSINGH	L	
l				

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 PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA

Course: 125 / WIREMAN Class: Third

Subject: 99955 / TRADE PRACTICAL

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA

Course: 125 / WIREMAN Class: Fourth

Subject: 99973 / ENGINEERING DRAWING

Name of the Controller

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88232260516079 | DAVINDER SINGH MATHAF 88232260516085 LOVEPREET SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller

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

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA

Course: 129 / TURNER

Class: Third

Subject: 99951 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88221260717022	BALJIT SINGH		
2	88221260717024	GURDITT SINGH		
3	88221260717025	GURPREET SINGH		
4	88221260717027	HARJEET SINGH		
5	88221260717030	JIVAN SINGH		
6	88221260717033	NAVJOT SINGH		
7	88221260717034	SATNAM SINGH		
8	88221260717035	SIMRANJEET SINGH		
9	88221260717037	 SUKHVIR SINGH		
Tot	al No. Of Students in al No. Of Answer She me and Signature Of	eets Packed >	osent:	
			Undertaki ng	
I (N abov have here	lame)_ re examination as Invi e appeared under my su by undertake that if	(Designation) gilator. I have personally che upervision in today's exam, hav any mistakes are found, I will	ecked and ensured that we been filled and sh	hereby certify that I have conducted the it particulars of all the students who haded correctly in the OMR sheets. I also any remuneration.
			Si gna	ture of the Invigilator
	ve conducted 20% rand ed correctly as per i		of the said examinati	on and found that particulars have been
Name	of the Superintender	nt	Si gna	ture of the Superintendent
l ha fill	ve conducted 10% rand ed correctly as per i	dom checking of the OMR sheet onstructions.	of the said examinati	on and found that particulars have been
Name	e of the Deputy Contro	oller	Si gna	ture of the Deputy Controller
l h fill	ave conducted 5% rand ed correctly as per i	dom checking of the OMR sheet c nstructions.	of the said examinati	on and found that particulars have been
Name	of the Controller		Si gna	ture of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA

Course: 129 / TURNER Class: Third

Subject: 99952 / WORKSHOP CAL. & SCIENCE

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88221260717022	BALJIT SINGH	1	
2	88221260717024	GURDITT SINGH	<u> </u>	
3	88221260717025	GURPREET SINGH	<u> </u>	<u> </u>
4	88221260717027	HARJEET SINGH	<u> </u>	<u> </u>
5	88221260717030	JIVAN SINGH	<u></u>	<u> </u>
6	88221260717033	NAVJOT SINGH	<u> </u>	<u> </u>
7	88221260717034	SATNAM SINGH	<u> </u>	<u> </u>
8	88221260717035	SIMRANJEET SINGH	<u></u>	<u> </u>
9	88221260717037	SUKHVIR SINGH		<u> </u>
Tot	al No. Of Students in al No. Of Answer She me and Signature Of	eets Packed >	sent:	
			Undertaki ng	
I (N abov have here	dame) re examination as Invi e appeared under my su eby undertake that if	(Designation) gilator. I have personally chec pervision in today's exam, have any mistakes are found, I will	ked and ensured that	nereby certify that I have conducted the particulars of all the students who uded correctly in the OMR sheets. I also any remuneration.
			Si gnat	ture of the Invigilator
	ive conducted 20% rand ed correctly as per i		the said examination	on and found that particulars have been
Name	e of the Superintenden	t	Si gnat	ture of the Superintendent
	ive conducted 10% rand ed correctly as per i		f the said examination	on and found that particulars have been
Name	e of the Deputy Contro	ller	Si gnat	rure of the Deputy Controller
l h fill	nave conducted 5% rand ed correctly as per i	lom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been
Name	e of the Controller		Si gnat	ture of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA

Course: 129 / TURNER Class: Third

Subject: 99953 / ENGINEERING DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88221260717022	BALJIT SINGH		L
2	88221260717024	GURDITT SINGH	<u> </u>	<u> </u>
3	88221260717025	GURPREET SINGH	L	<u>L</u>
4	88221260717027	HARJEET SINGH	L	<u>L</u>
5	88221260717030	JIVAN SINGH	L	<u>L</u>
6	88221260717033	NAVJOT SINGH	<u> </u>	<u> </u>
7	88221260717034	SATNAM SINGH	<u> </u>	<u>L</u>
8	88221260717035	SIMRANJEET SINGH	<u> </u>	<u>L</u>
9	88221260717037	SUKHVIR SINGH		I
Tota	al No. Of Students in al No. Of Answer She me and Signature Of		ent:	
			Undertaki ng	
I (Na above have here	ame) e examination as Invi appeared under my su by undertake that if	(Designation) gilator. I have personally chec upervision in today's exam, have any mistakes are found, I will	hked and ensured that been filled and shannot be entitled for	ereby certify that I have conducted the particulars of all the students who ded correctly in the OMR sheets. I also any remuneration.
			Si gnat	ure of the Invigilator
	ve conducted 20% rand ed correctly as per i		the said examinatio	n and found that particulars have been
Name	of the Superintender	nt	Si gnat	ure of the Superintendent
l ha fill	ve conducted 10% rand ed correctly as per i	dom checking of the OMR sheet of nstructions.	the said examinatio	n and found that particulars have been
Name	of the Deputy Contro	oller	Si gnat	ure of the Deputy Controller
l ha fill	ave conducted 5% ranc ed correctly as per i	dom checking of the OMR sheet of nstructions.	the said examinatio	n and found that particulars have been
Name	of the Controller		Si gnat	ure of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA

Course: 129 / TURNER Class: Third

Subject: 99955 / TRADE PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88221260717022	BALJIT SINGH		L
2	88221260717024	GURDITT SINGH	<u> </u>	<u> </u>
3	88221260717025	GURPREET SINGH	L	<u>L</u>
4	88221260717027	HARJEET SINGH	L	<u>L</u>
5	88221260717030	JIVAN SINGH	L	<u>L</u>
6	88221260717033	NAVJOT SINGH	<u> </u>	<u> </u>
7	88221260717034	SATNAM SINGH	<u> </u>	<u>L</u>
8	88221260717035	SIMRANJEET SINGH	<u> </u>	<u>L</u>
9	88221260717037	SUKHVIR SINGH		I
Tota	al No. Of Students in al No. Of Answer She me and Signature Of		ent:	
			Undertaki ng	
I (Na above have here	ame) e examination as Invi appeared under my su by undertake that if	(Designation) gilator. I have personally chec upervision in today's exam, have any mistakes are found, I will	hked and ensured that been filled and shannot be entitled for	ereby certify that I have conducted the particulars of all the students who ded correctly in the OMR sheets. I also any remuneration.
			Si gnat	ure of the Invigilator
	ve conducted 20% rand ed correctly as per i		the said examinatio	n and found that particulars have been
Name	of the Superintender	nt	Si gnat	ure of the Superintendent
l ha fill	ve conducted 10% rand ed correctly as per i	dom checking of the OMR sheet of nstructions.	the said examinatio	n and found that particulars have been
Name	of the Deputy Contro	oller	Si gnat	ure of the Deputy Controller
l ha fill	ave conducted 5% ranc ed correctly as per i	dom checking of the OMR sheet of nstructions.	the said examinatio	n and found that particulars have been
Name	of the Controller		Si gnat	ure of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 of 2

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA

Course: 132 / ELECTRICIAN Class: Third

Subject: 99951 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231260717038	ANKIT SINGH		
2	88231260717039	JEKAM SINGH	L	L
3	88231260717040	GURJIT SINGH	L	<u></u>
4	88231260717041	GURWINDER SINGH	L	L
5	88231260717042	HARMANJEET SINGH	L	L
6	88231260717045	INDERPAL SINGH	<u> </u>	<u> </u>
7	88231260717046	JASKARAN SINGH	<u> </u>	L
8	88231260717047	JATIN SHAHI	<u> </u>	<u> </u>
9	88231260717050	MANJOT SINGH	<u> </u>	<u> </u>
10	88231260717051	RAJAN SINGH	<u> </u>	<u> </u>
11	88231260717052	RAVINDER SINGH	<u> </u>	<u> </u>
12	88231260717053	_] ROHIT	<u> </u>	<u></u>
13	88231260717054	JSAJAN MEHAL	<u> </u>	<u> </u>
14	88231260717056	GURWINDER SINGH	<u> </u>	<u> </u>
15	88231260717057	JASWINDER SINGH	<u> </u>	L

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA Center Name:

Course: 132 / ELECTRICIAN Class: Third

Subject: 99951 / TRADE THEORY

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA

Course: 132 / ELECTRICIAN Class: Third

Subject: 99952 / WORKSHOP CAL. & SCIENCE

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231260717038	_J ANKIT SINGH		
2	88231260717039	JEKAM SINGH	L	<u></u>
3	88231260717040	JGURJIT SINGH	<u> </u>	L
4	88231260717041	GURWINDER SINGH	<u> </u>	L
5	88231260717042	_J HARMANJEET SINGH	<u> </u>	L
6	88231260717045	INDERPAL SINGH	<u> </u>	<u> </u>
7	88231260717046	JASKARAN SINGH	<u> </u>	<u> </u>
8	88231260717047	JATIN SHAHI	<u> </u>	<u> </u>
9	88231260717050	MANJOT SINGH	<u> </u>	<u> </u>
10	88231260717051	RAJAN SINGH	<u> </u>	<u> </u>
11	88231260717052	RAVINDER SINGH	<u> </u>	<u> </u>
12	88231260717053	_] ROHIT	<u> </u>	<u> </u>
13	88231260717054	JSAJAN MEHAL	<u> </u>	L
14	88231260717056	GURWINDER SINGH		L
15	88231260717057	JASWINDER SINGH	<u></u>	<u> </u>

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA

Course: 132 / ELECTRICIAN Class: Third

Subject: 99952 / WORKSHOP CAL. & SCIENCE

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 of

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA

Course: 132 / ELECTRICIAN Class: Third

Subject: 99953 / ENGINEERING DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231260717038	ANKIT SINGH		L
2	88231260717039	LEKAM SINGH		I
3	88231260717040	GURJIT SINGH		I
4	88231260717041	GURWINDER SINGH		I
5	88231260717042	HARMANJEET SINGH		
6	88231260717045	INDERPAL SINGH		
7	88231260717046	JASKARAN SINGH		L
8	88231260717047	JATIN SHAHI		
9	88231260717050	MANJOT SINGH		
10	88231260717051	RAJAN SINGH		
11	88231260717052	RAVINDER SINGH		
12	88231260717053	ROHIT		
13	88231260717054	SAJAN MEHAL		L
14	88231260717056	GURWINDER SINGH		
15	88231260717057	JASWINDER SINGH		

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA

Course: 132 / ELECTRICIAN Class: Third

Subject: 99953 / ENGINEERING DRAWING

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 of

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA

Course: 132 / ELECTRICIAN Class: Third

Subject: 99955 / TRADE PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231260717038	ANKIT SINGH		I
2	88231260717039	LEKAM SINGH		L
3	88231260717040	GURJIT SINGH		L
4	88231260717041	GURWINDER SINGH		L
5	88231260717042	HARMANJEET SINGH		L
6	88231260717045	INDERPAL SINGH		
7	88231260717046	JASKARAN SINGH		L
8	88231260717047	JATIN SHAHI		L
9	88231260717050	MANJOT SINGH		
10	88231260717051	RAJAN SINGH		L
11	88231260717052	RAVINDER SINGH		
12	88231260717053			
13	88231260717054	SAJAN MEHAL		
14	88231260717056	GURWINDER SINGH		
15 _I	88231260717057	_I JASWINDER SINGH	 	

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA Center Name:

Course: 132 / ELECTRICIAN Class: Third

99955 / TRADE PRACTICAL Subject:

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA Center Name: Course : 132 / ELECTRICIAN Class: Fourth 99973 / ENGINEERING DRAWING Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88231360715019 | GAGANDEEP SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA Course : 150 / CUTTING & SEWING Class: Second 99977 / EMPLOYABILITY SKILLS Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88247160317015 | RENU BALA Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA Course : 165 / HAIR & SKIN CARE Class: Second 99977 / EMPLOYABILITY SKILLS Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88110560314145 | PARMJEET KAUR Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA

Course: 175 / CUTTING SEW. & EMB. TEACHER'S TRAINING Class: First

Subject: 17511 / PRINCIPLE OF EDUCATION

S.No | Regd. No. | Name Of the Student | Answer Sheet No. | Student's Sign.

Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

88175163217019 _| RAJVIR KAUR

10

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING
PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT
Center Name: 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA
Course: 175 / CUTTING SEW. & EMB. TEACHER'S TRAINING 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

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA Course : 192 / CONSUMER ELECTRONICS Class: Second 99931 / TRADE THEORY Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88273260516115 | SATVEER SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA Course : 192 / CONSUMER ELECTRONICS Class: Fourth 99975 / TRADE PRACTICAL Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88273260716032 | JASMEET SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: Second

99941 / TRADE THEORY Subject:

Name of the Deputy Controller

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

Name of the Controller

PAGE: 1 of

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88242160517098 | ARASHDEEP SINGH 88242160517113 | IQBAL SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

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

Signature of the Deputy Controller

Signature of the Controller

Name Of Invigilator

Signature Of Invigilator

Center Name: 2231 / INDUSTRIAL TRAINING INSTITUTE (W), JALANDHAR Course : 111 / WELDER (GAS AND ELECTRIC) Class: Second 99933 / ENGINEERING DRAWING Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88212170317004 | SAHIL MALHOTRA Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been

Signature of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 1 of

filled correctly as per instructions.

Name of the Controller

PAGE: 1 of ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2231 / INDUSTRIAL TRAINING INSTITUTE (W), JALANDHAR Course : 128 / FITTER Class: Second 99933 / ENGINEERING DRAWING Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88227270317008 | INDERJEET SINGH 88227270317012 | PARAMVIR SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING
PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT
Center Name: 2231 / INDUSTRIAL TRAINING INSTITUTE (W) , JALANDHAR
Course: 128 / FITTER Class: Third
Subject: 99951 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88227270317008	INDERJEET SINGH		
2	88227270317012			
3	88227270317013	GURPREET SINGH		
To	otal No. Of Students in otal No. Of Answer She ame and Signature Of	eets Packed >	osent:	
			Undertaki ng	
hav	⁄e appeared under mv su	(Designation)_ gilator. I have personally che upervision in today's exam, hav any mistakes are found, I will	re been filled and sha	nereby certify that I have conducted the t particulars of all the students who aded correctly in the OMR sheets. I also any remuneration.
			Si gna	ture of the Invigilator
l h fil	nave conducted 20% rand led correctly as per i	dom checking of the OMR sheet c nstructions.	of the said examination	on and found that particulars have been
Nam	ne of the Superintender	nt	Si gna	ture of the Superintendent
l h fil	nave conducted 10% rand led correctly as per i	dom checking of the OMR sheet c nstructions.	of the said examination	on and found that particulars have been
Nam	ne of the Deputy Contro	oller	Si gna	ture of the Deputy Controller
l fi l	have conducted 5% rand led correctly as per i	dom checking of the OMR sheet c nstructions.	of the said examination	on and found that particulars have been
Nam	ne of the Controller		Si gna	ture of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2231 / INDUSTRIAL TRAINING INSTITUTE (W), JALANDHAR

Course: 128 / FITTER Class: Third

Subject: 99952 / WORKSHOP CAL. & SCIENCE

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88227270317008 | INDERJEET SINGH 88227270317012 | PARAMVIR SINGH 88227270317013 GURPREET SINGH 3 Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Controller Signature of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

2231 / INDUSTRIAL TRAINING INSTITUTE (W), JALANDHAR Center Name:

Course : 128 / FITTER

Class: Third

99953 / ENGINEERING DRAWING Subject:

PAGE: 1 of

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88227270317008 | INDERJEET SINGH 2 88227270317012 | PARAMVIR SINGH 88227270317013 GURPREET SINGH 3 Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Controller Signature of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2231 / INDUSTRIAL TRAINING INSTITUTE (W), JALANDHAR

Course: 128 / FITTER Class: Third

Subject: 99955 / TRADE PRACTICAL

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 of ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2231 / INDUSTRIAL TRAINING INSTITUTE (W), JALANDHAR Course : 132 / ELECTRICIAN Class: First 99911 / Trade Theory Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88231270317015 $_{\mid}$ AKASHDEEP SINGH 88231270317033 | SUNNY KAILE Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 of ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2231 / INDUSTRIAL TRAINING INSTITUTE (W), JALANDHAR Course : 132 / ELECTRICIAN Class: First 99966 / EMPLOYABILITY SKILLS Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88231270317015 | AKASHDEEP SINGH 88231270317033 | SUNNY KAILE Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

Center Name: 2231 / INDUSTRIAL TRAINING INSTITUTE (W), JALANDHAR Course : 132 / ELECTRICIAN Class: Second 99931 / TRADE THEORY Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88231270317033 | SUNNY KAILE Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been

Signature of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 1 of

filled correctly as per instructions.

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 of ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2231 / INDUSTRIAL TRAINING INSTITUTE (W), JALANDHAR Course : 132 / ELECTRICIAN Class: Second 99932 / WORKSHOP CAL. & SCIENCE Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88231270317014 | AKASHDEEP 88231270317033_|SUNNY KAILE Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 of 2

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

2231 / INDUSTRIAL TRAINING INSTITUTE (W) , JALANDHAR Center Name:

Course: 132 / ELECTRICIAN Class: Second

Subject: 99933 / ENGINEERING DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231270317014	AKASHDEEP	<u> </u>	<u> </u>
2	88231270317015	AKASHDEEP SINGH	<u> </u>	<u></u>
3	88231270317016	BHUPINDER SINGH	<u> </u>	<u></u>
4	88231270317017	CHAMKOR SINGH	<u> </u>	<u></u>
5 	88231270317018	GURPINDER SINGH	<u> </u>	L
6	88231270317019	HARDEEP SINGH	<u> </u>	L
7	88231270317021	HARPREET SINGH	<u> </u>	L
8	88231270317022	JOBANDEEP SINGH	<u> </u>	
9	88231270317023	KOMALPREET	<u> </u>	
10	88231270317024	_J MD SADDAM	<u> </u>	
11	88231270317025	SAHIL KUMAR	<u> </u>	
12	88231270317026	SHAMSHER SINGH	<u> </u>	
13	88231270317027	SHUBHAM		
14	88231270317028	SIMRAN		L
15	88231270317029	SIMRANDEEP SINGH GILL		
16	88231270317031	SUKHWINDER PAL		
17	88231270317032	SUKHWINDER SINGH		
18	88231270317033	SUNNY KAILE		
19	88231270317034	VARINDER SINGH		

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2231 / INDUSTRIAL TRAINING INSTITUTE (W), JALANDHAR Center Name: Course: 132 / ELECTRICIAN Class: Second 99933 / ENGINEERING DRAWING Subject: Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent

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

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 of ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2231 / INDUSTRIAL TRAINING INSTITUTE (W), JALANDHAR Course : 132 / ELECTRICIAN Class: Second 99977 / EMPLOYABILITY SKILLS Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88231270317014 | AKASHDEEP 88231270317033_|SUNNY KAILE Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 of 2

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

2231 / INDUSTRIAL TRAINING INSTITUTE (W) , JALANDHAR Center Name:

Course: 132 / ELECTRICIAN Class: Third

Subject: 99951 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231270317014	AKASHDEEP		L
2	88231270317015	AKASHDEEP SINGH		
3	88231270317016	BHUPINDER SINGH		
4	88231270317017	CHAMKOR SINGH		
5	88231270317018	GURPINDER SINGH		
6	88231270317019	HARDEEP SINGH		
7	88231270317021	HARPREET SINGH		
8	88231270317022	JOBANDEEP SINGH		
9	88231270317023	KOMALPREET		
10	88231270317024	_J MD SADDAM		
11	88231270317025	SAHIL KUMAR		
12	88231270317026	SHAMSHER SINGH		
13	88231270317027	SHUBHAM		
14	88231270317028	SIMRAN		
15	88231270317029	SIMRANDEEP SINGH GILL		L
16	88231270317031	SUKHWINDER PAL		
17	88231270317032	SUKHWINDER SINGH		
18	88231270317033	SUNNY KAILE		
19	88231270317034	VARINDER SINGH		
		·		

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2231 / INDUSTRIAL TRAINING INSTITUTE (W), JALANDHAR Center Name: Course: 132 / ELECTRICIAN Class: Third 99951 / TRADE THEORY Subject: Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent

Name of the Deputy Controller

filled correctly as per instructions.

Signature of the Deputy Controller

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

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2231 / INDUSTRIAL TRAINING INSTITUTE (W) , JALANDHAR

Course: 132 / ELECTRICIAN Class: Third

Subject: 99952 / WORKSHOP CAL. & SCIENCE

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231270317014	_] AKASHDEEP	<u> </u>	<u> </u>
2	88231270317015	JAKASHDEEP SINGH	<u> </u>	L
3	88231270317016	BHUPINDER SINGH	<u> </u>	L
4	88231270317017	CHAMKOR SINGH	<u> </u>	L
5 	88231270317018	GURPINDER SINGH	<u> </u>	L
6	88231270317019	HARDEEP SINGH	<u> </u>	L
7	88231270317021	HARPREET SINGH	<u> </u>	L
8	88231270317022	JOBANDEEP SINGH	<u> </u>	L
9	88231270317023	J KOMALPREET	<u> </u>	L
10	88231270317024	JMD SADDAM	<u> </u>	L
11	88231270317025	SAHIL KUMAR	<u> </u>	L
12	88231270317026	SHAMSHER SINGH	<u> </u>	L
13	88231270317027	SHUBHAM	<u> </u>	L
14	88231270317028	SIMRAN	<u> </u>	<u> </u>
15 	88231270317029	SIMRANDEEP SINGH GILL	<u> </u>	<u> </u>
16	88231270317031	SUKHWINDER PAL	L	<u></u>
17 	88231270317032	SUKHWINDER SINGH	L	<u></u>
18	88231270317033	JSUNNY KAILE	<u> </u>	L
19	88231270317034	VARINDER SINGH		<u> </u>

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2231 / INDUSTRIAL TRAINING INSTITUTE (W), JALANDHAR Center Name: Course: 132 / ELECTRICIAN Class: Third 99952 / WORKSHOP CAL. & SCIENCE Subject: Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent

filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

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

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 of 2

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

2231 / INDUSTRIAL TRAINING INSTITUTE (W) , JALANDHAR Center Name:

Course: 132 / ELECTRICIAN Class: Third

Subject: 99953 / ENGINEERING DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231270317014	AKASHDEEP	<u> </u>	L
2	88231270317015	AKASHDEEP SINGH	<u> </u>	L
3	88231270317016	BHUPINDER SINGH	<u> </u>	L
4	88231270317017	CHAMKOR SINGH	<u> </u>	L
5	88231270317018	GURPINDER SINGH	<u> </u>	L
6	88231270317019	HARDEEP SINGH	<u> </u>	L
7	88231270317021	HARPREET SINGH	<u> </u>	L
8	88231270317022	JOBANDEEP SINGH	<u> </u>	L
9	88231270317023	KOMALPREET	<u> </u>	L
10	88231270317024	_J MD SADDAM	<u> </u>	L
11 	88231270317025	SAHIL KUMAR	<u> </u>	L
12	88231270317026	SHAMSHER SINGH	<u> </u>	L
13	88231270317027	SHUBHAM		L
14	88231270317028	SIMRAN	<u> </u>	L
15	88231270317029	SIMRANDEEP SINGH GILL	<u> </u>	L
16	88231270317031	SUKHWINDER PAL	 	
17	88231270317032	SUKHWINDER SINGH	 	
18	88231270317033	SUNNY KAILE		<u></u>
19	88231270317034	VARINDER SINGH		L

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2231 / INDUSTRIAL TRAINING INSTITUTE (W), JALANDHAR Center Name: Course: 132 / ELECTRICIAN Class: Third 99953 / ENGINEERING DRAWING Subject: Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent

Name of the Deputy Controller

filled correctly as per instructions.

Signature of the Deputy Controller

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

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 of 2

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2231 / INDUSTRIAL TRAINING INSTITUTE (W) , JALANDHAR

Course: 132 / ELECTRICIAN Class: Third

Subject: 99955 / TRADE PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231270317014	AKASHDEEP	<u> </u>	L
2	88231270317015	AKASHDEEP SINGH	<u> </u>	L
3	88231270317016	BHUPINDER SINGH	L	L
4	88231270317017	CHAMKOR SINGH	L	L
5	88231270317018	GURPINDER SINGH	<u> </u>	L
6	88231270317019	HARDEEP SINGH	<u> </u>	L
7	88231270317021	HARPREET SINGH	<u> </u>	L
8	88231270317022	JOBANDEEP SINGH	L	L
9	88231270317023	KOMALPREET	L	L
10	88231270317024	_J MD SADDAM	L	L
11	88231270317025	SAHIL KUMAR	L	L
12	88231270317026	SHAMSHER SINGH	<u> </u>	L
13	88231270317027	SHUBHAM	<u> </u>	L
14	88231270317028	SIMRAN	<u> </u>	L
15	88231270317029	SIMRANDEEP SINGH GILL		L
16	88231270317031	SUKHWINDER PAL		
17	88231270317032	SUKHWINDER SINGH		
18	88231270317033	SUNNY KAILE		
19	88231270317034	VARINDER SINGH	 	

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2231 / INDUSTRIAL TRAINING INSTITUTE (W), JALANDHAR Center Name: Course: 132 / ELECTRICIAN Class: Third 99955 / TRADE PRACTICAL Subject: Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent

Name of the Deputy Controller

filled correctly as per instructions.

Signature of the Deputy Controller

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

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been

Name of the Controller

Center Name: 2231 / INDUSTRIAL TRAINING INSTITUTE (W), JALANDHAR Course : 175 / CUTTING SEW. & EMB. TEACHER'S TRAINING Class: First 17511 / PRINCIPLE OF EDUCATION Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88175170117038 | PARMINDER KAUR Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been

Signature of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 1

filled correctly as per instructions.

Name of the Controller

Center Name: 2231 / INDUSTRIAL TRAINING INSTITUTE (W), JALANDHAR Course : 175 / CUTTING SEW. & EMB. TEACHER'S TRAINING Class: First 17512 / TRADE THEORY Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88175170117051 | SAPNA KAUL Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been

Signature of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 1

No.Of Students On This Page >> Present>> Absent >> Name Of Invigilator Signature Of Invigilator

filled correctly as per instructions.

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2231 / INDUSTRIAL TRAINING INSTITUTE (W), JALANDHAR Course : 189 / INFORMATION TECH.& ELECT.SYS.MTN. Class: Third 99953 / ENGINEERING DRAWING Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88220270116102 _| ANJALI Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

Center Name: 2231 / INDUSTRIAL TRAINING INSTITUTE (W), JALANDHAR Course : 222 / COMP. OP. PROGRAM. ASSISTANT Class: Second 99945 / TRADE PRACTICAL Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88242170317060 $_{\mid}$ MANDEEP SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been

Signature of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 1

No.Of Students On This Page >> Present>> Absent >> Name Of Invigilator Signature Of Invigilator

filled correctly as per instructions.

Name of the Controller

2231 / INDUSTRIAL TRAINING INSTITUTE (W), JALANDHAR Center Name: Course : 370 / ART & CRAFTS Class: First 17055 / CRAFT(T) Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88370173117002 | MANSI VERMA Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been

Signature of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 1

filled correctly as per instructions.

Name of the Controller

2231 / INDUSTRIAL TRAINING INSTITUTE (W) , JALANDHAR Center Name: Course : 370 / ART & CRAFTS Class: First 17059 / DESIGN Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88370173317017 | SIMRAN BADHAN Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

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Name of the Controller Signature of the Controller

filled correctly as per instructions.

2231 / INDUSTRIAL TRAINING INSTITUTE (W), JALANDHAR Center Name: Course : 370 / ART & CRAFTS Class: First 17070 / PRINCIPLES OF EDUCATION Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88370173317017 | SIMRAN BADHAN Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been

Signature of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 1

No.Of Students On This Page >> Present>> Absent >> Name Of Invigilator Signature Of Invigilator

filled correctly as per instructions.

Name of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2231 / INDUSTRIAL TRAINING INSTITUTE (W), JALANDHAR Course : 370 / ART & CRAFTS Class: Second 70055 / CRAFT(T) Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88370173316004 | ANUJ AGGARWAL 88370173316018 | MANPREET SINGH 88370173316020 | MARCUS Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

Name of the Superintendent

PAGE: 1 of

3

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

2231 / INDUSTRIAL TRAINING INSTITUTE (W), JALANDHAR Center Name: Course : 370 / ART & CRAFTS Class: Second 70070 / EDUCATIONAL PSYCHOLOGY Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88370173316004 $_{\mid}$ ANUJ AGGARWAL Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

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

Name of the Controller

PAGE: 1

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 of ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2231 / INDUSTRIAL TRAINING INSTITUTE (W), JALANDHAR Course: 370 / ART & CRAFTS Class: Second 70071 / HISTORY & APPRECIATION OF ART Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88370173316003 | ANKUR GUPTA 88370173316020₁MARCUS

Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

88370973415017 | PANKAJ

88370973415034 | PALAK

2

3

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2311 / INDUSTRIAL TRAINING INSTITUTE ,NAWANSHEHAR

Course: 111 / WELDER (GAS AND ELECTRIC) Class: First

Subject: 99911 / Trade Theory

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88212171416010 | GURPREET 88212271415039 | LAKHVIR CHAND Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been

filled correctly as per instructions.

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2311 / INDUSTRIAL TRAINING INSTITUTE ,NAWANSHEHAR

Course: 111 / WELDER (GAS AND ELECTRIC)

Class: First

Subject: 99966 / EMPLOYABILITY SKILLS

Name of the Controller

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.		
1	88212171416010	JGURPREET	<u></u>	<u></u>		
2	88212271415039	LAKHVIR CHAND	1	<u> </u>		
To	Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge					
			Undertaki ng			
hav	I (Name) hereby certify that I have conducted above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I a hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.					
			Si gnat	ure of the Invigilator		
l h fil	ave conducted 20% rand Led correctly as per i	dom checking of the OMR sheet of instructions.	the said examination	n and found that particulars have been		
Nam	e of the Superintender	nt	Si gnat	ure of the Superintendent		
l h fil	ave conducted 10% rand Led correctly as per i	dom checking of the OMR sheet of instructions.	the said examination	n and found that particulars have been		
Nam	e of the Deputy Contro	oller	Si gnat	ure of the Deputy Controller		
	have conducted 5% rand led correctly as per i		the said examination	n and found that particulars have been		

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2311 / INDUSTRIAL TRAINING INSTITUTE ,NAWANSHEHAR

111 / WELDER (GAS AND ELECTRIC) Course:

Class: Second

Subject: 99931 / TRADE THEORY

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88212171417005	JASVIR SINGH	<u> </u>	L
2	88212171417006	KULDIP KUMAR	<u> </u>	L
3	88212171417007	LAKHWINDER KUMAR	<u> </u>	L
4	88212171417010	MUKESH KUMAR	<u> </u>	L
5 	88212171417011	RAJIV KUMAR	<u> </u>	L
6	88212171417012	SACHIN		L
7	88212171417013	SANDEEP KUMAR	<u> </u>	L
8	88212171417045	GURDEEP SINGH	<u> </u>	L
9	88212171417047	JASPREET BADHAN	<u> </u>	L
10	88212171417048	LAKHWINDER SINGH	<u> </u>	L
11	88212171417049	MANISH SINGH	<u> </u>	L
12	88212171417053	PRINCE SEHGAL	<u> </u>	L
13	88212171417055	RAVI KUMAR	<u> </u>	L

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING
PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT
Center Name: 2311 / INDUSTRIAL TRAINING INSTITUTE ,NAWANSHEHAR
Course: 111 / WELDER(GAS AND ELECTRIC) Class: Second
Subject: 99931 / 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) hereby certify that I have conducted above examination as Invigil ator. I have personally checked and ensured that particulars of all the students

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2311 / INDUSTRIAL TRAINING INSTITUTE ,NAWANSHEHAR

Course: 111 / WELDER(GAS AND ELECTRIC)

99932 / WORKSHOP CAL. & SCIENCE

Class: Second

Name Of the Student

Subject:

Regd. No.

S.No

0.110			Aliswei Sheet No.	
1	88212171417005	JASVIR SINGH		
2	88212171417006	KULDIP KUMAR	<u> </u>	L
3	88212171417007	LAKHWINDER KUMAR	<u> </u>	L
4	88212171417010	MUKESH KUMAR	<u> </u>	L
5	88212171417011	RAJIV KUMAR		L
6	88212171417047	JASPREET BADHAN		<u> </u>
7	88212171417048	LAKHWINDER SINGH		L
8	88212171417049	MANISH SINGH	<u> </u>	L
9	88212171417053	PRINCE SEHGAL	<u> </u>	<u> </u>
10	88212171417055	_J RAVI KUMAR		

Answer Sheet No.

Student's Sign.

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

Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2311 / INDUSTRIAL TRAINING INSTITUTE , NAWANSHEHAR Course: 111 / WELDER (GAS AND ELECTRIC) Class: Second Subject: 99932 / WORKSHOP CAL. & SCIENCE Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2311 / INDUSTRIAL TRAINING INSTITUTE ,NAWANSHEHAR

Course: 111 / WELDER (GAS AND ELECTRIC)

Class: Second

Subject: 99933 / ENGINEERING DRAWING

S.	.No Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88212171417011	RAJIV KUMAR		<u> </u>
2	88212171417048			L
3		DDINIOE OFLICAL		
4	88212171417055			L
	Total No. Of Students in Total No. Of Answer Sho Name and Signature Of			
			Undertaki ng	
	have appeared under my su	(Designation) igilator. I have personally chec upervision in today's exam, have any mistakes are found, I will	been filled and sha	ereby certify that I have conducted the particulars of all the students who ded correctly in the OMR sheets. I also any remuneration.
			Si gnat	ure of the Invigilator
	I have conducted 20% rand filled correctly as per i	dom checking of the OMR sheet of instructions.	the said examination	n and found that particulars have been
	Name of the Superintender	nt	Si gnat	ure of the Superintendent
	I have conducted 10% rand filled correctly as per i	dom checking of the OMR sheet of instructions.	the said examination	n and found that particulars have been
	Name of the Deputy Contro	oller	Si gnat	ure of the Deputy Controller
	I have conducted 5% rand filled correctly as per i	dom checking of the OMR sheet of instructions.	the said examination	n and found that particulars have been
	Name of the Controller		Si gnat	ure of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2311 / INDUSTRIAL TRAINING INSTITUTE ,NAWANSHEHAR

Course: 111 / WELDER(GAS AND ELECTRIC) Class: Second

Subject: 99977 / EMPLOYABILITY SKILLS

PAGE: 1

10

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	8821217141700	⁵ JASVIR SINGH		
2	8821217141700	6 KULDIP KUMAR		_L
3	8821217141700	⁷ LAKHWINDER KUMAR		_L
4	8821217141701	⁰ MUKESH KUMAR		
5 	8821217141701	¹ RAJIV KUMAR		_L
6	8821217141704	7 JASPREET BADHAN		_L
7	8821217141704	⁸ LAKHWINDER SINGH		_L
8	8821217141704	9 _J MANISH SINGH		
•	0001017111705			

Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

88212171417053 | PRINCE SEHGAL

88212171417055 | RAVI KUMAR

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING
PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT
Center Name: 2311 / INDUSTRIAL TRAINING INSTITUTE ,NAWANSHEHAR
Course: 111 / WELDER (GAS AND ELECTRIC) Class: Second
Subject: 99977 / EMPLOYABILITY SKILLS

Total No. Of Students in this Subject > Present: Absent:
Total No. Of Answer Sheets Packed >
Name and Signature Of Incharge

Undertaking

I (Name) hereby certify that I have conducted above examination as Invigilator. I have personally checked and ensured that particulars of all the students

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

2311 / INDUSTRIAL TRAINING INSTITUTE , NAWANSHEHAR Center Name: Course : 132 / ELECTRICIAN Class: Second 99932 / WORKSHOP CAL. & SCIENCE Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88231271417017 | HARVIR SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Signature of the Deputy Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 1

Name of the Deputy Controller

filled correctly as per instructions.

Name of the Controller Signature of the Controller

2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2311 / INDUSTRIAL TRAINING INSTITUTE ,NAWANSHEHAR

Course: 132 / ELECTRICIAN Class: Second

Subject: 99933 / ENGINEERING DRAWING

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231271417015	CHARANJIT SINGH		L
2	88231271417016	HARSHJOT SINGH SHERGI		L
3	88231271417017	HARVIR SINGH		<u> </u>
4	88231271417018	HOSHIAR SINGH		L
5 	88231271417019	HARMANJEET SINGH		L
6	88231271417021	JONY RAM		L
7	88231271417023	MANINDER SINGH		L
8	88231271417024	MANPREET SINGH		L
9	88231271417025	NADISH KUMAR		L
10	88231271417027	RAHUL		L
11	88231271417028	SATVIR		L
12	88231271417029	SHAMEER KUMAR		<u> </u>
13	88231271417030	SIMRANJIT SINGH		L

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

Total No. Of Answer Sheets Packed >

88231271417031 | SUKHCHAIN

Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2311 / INDUSTRIAL TRAINING INSTITUTE , NAWANSHEHAR Center Name:

Course: 132 / ELECTRICIAN Class: Second

99933 / ENGINEERING DRAWING Subject:

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

2311 / INDUSTRIAL TRAINING INSTITUTE , NAWANSHEHAR Center Name: Course : 132 / ELECTRICIAN Class: Second 99977 / EMPLOYABILITY SKILLS Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88231271417017 | HARVIR SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

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

Name of the Controller

Name of the Deputy Controller

PAGE: 1

Signature of the Controller

Signature of the Deputy Controller

2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2311 / INDUSTRIAL TRAINING INSTITUTE ,NAWANSHEHAR

Course: 132 / ELECTRICIAN Class: Third

Subject: 99951 / TRADE THEORY

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231271417015	CHARANJIT SINGH	<u> </u>	<u></u>
2	88231271417016	HARSHJOT SINGH SHERGI	<u> </u>	L
3	88231271417017	HARVIR SINGH	<u> </u>	L
4	88231271417018	HOSHIAR SINGH		L
5	88231271417019	HARMANJEET SINGH		L
6	88231271417021	JONY RAM		<u> </u>
7	88231271417023	MANINDER SINGH	<u> </u>	L
8	88231271417024	MANPREET SINGH		L
9	88231271417025	NADISH KUMAR		L
10	88231271417027	RAHUL		L
11	88231271417028	SATVIR		
12	88231271417029	SHAMEER KUMAR		
13	88231271417030	SIMRANJIT SINGH		
14	88231271417031	 SUKHCHAIN	 	
'				

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

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2311 / INDUSTRIAL TRAINING INSTITUTE ,NAWANSHEHAR

Course: 132 / ELECTRICIAN Class: Third

Subject: 99951 / TRADE THEORY

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2311 / INDUSTRIAL TRAINING INSTITUTE ,NAWANSHEHAR

Course: 132 / ELECTRICIAN Class: Third

Subject: 99952 / WORKSHOP CAL. & SCIENCE

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231271417015	CHARANJIT SINGH	<u> </u>	<u> </u>
2	88231271417016	HARSHJOT SINGH SHERGI	<u> </u>	<u> </u>
3	88231271417017	HARVIR SINGH	<u> </u>	<u> </u>
4	88231271417018	HOSHIAR SINGH	<u> </u>	<u> </u>
5	88231271417019	HARMANJEET SINGH	<u> </u>	<u>L</u>
6	88231271417021	JONY RAM	<u> </u>	<u> </u>
7	88231271417023	MANINDER SINGH	<u> </u>	<u> </u>
8	88231271417024	MANPREET SINGH	<u> </u>	<u> </u>
9	88231271417025	NADISH KUMAR	<u> </u>	<u> </u>
10	88231271417027	_] RAHUL	<u> </u>	<u> </u>
11	88231271417028	SATVIR		L
12	88231271417029	SHAMEER KUMAR		<u> </u>
13	88231271417030	SIMRANJIT SINGH	<u> </u>	L
14	88231271417031	SUKHCHAIN	<u></u>	

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

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2311 / INDUSTRIAL TRAINING INSTITUTE , NAWANSHEHAR Center Name: Course: 132 / ELECTRICIAN Class: Third

99952 / WORKSHOP CAL. & SCIENCE Subject:

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2311 / INDUSTRIAL TRAINING INSTITUTE ,NAWANSHEHAR

Course: 132 / ELECTRICIAN Class: Third

Subject: 99953 / ENGINEERING DRAWING

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231271417015	CHARANJIT SINGH	<u> </u>	<u> </u>
2	88231271417016	HARSHJOT SINGH SHERGI	<u> </u>	L
3	88231271417017	HARVIR SINGH	<u> </u>	L
4	88231271417018	HOSHIAR SINGH	<u> </u>	L
5	88231271417019	HARMANJEET SINGH		L
6	88231271417021	JONY RAM		L
7	88231271417023	MANINDER SINGH	<u> </u>	L
8	88231271417024	MANPREET SINGH		L
9	88231271417025	NADISH KUMAR		L
10	88231271417027	RAHUL		L
11	88231271417028	SATVIR		I
12	88231271417029	SHAMEER KUMAR		
13	88231271417030	SIMRANJIT SINGH		
14	88231271417031	 SUKHCHAIN		

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

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

2311 / INDUSTRIAL TRAINING INSTITUTE , NAWANSHEHAR Center Name:

Course: 132 / ELECTRICIAN Class: Third

99953 / ENGINEERING DRAWING Subject:

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2311 / INDUSTRIAL TRAINING INSTITUTE ,NAWANSHEHAR

Course: 132 / ELECTRICIAN Class: Third

Subject: 99955 / TRADE PRACTICAL

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231271417015	CHARANJIT SINGH	<u> </u>	
2	88231271417016	HARSHJOT SINGH SHERGI	<u> </u>	L
3	88231271417017	HARVIR SINGH	<u> </u>	L
4	88231271417018	HOSHIAR SINGH	<u> </u>	L
5 	88231271417019	HARMANJEET SINGH	<u> </u>	L
6	88231271417021	JONY RAM	<u> </u>	L
7	88231271417023	MANINDER SINGH	<u> </u>	L
8	88231271417024	JMANPREET SINGH	<u> </u>	L
9	88231271417025	NADISH KUMAR	<u> </u>	L
10	88231271417027	_] RAHUL	<u> </u>	L
11	88231271417028	_] SATVIR	<u> </u>	L
12	88231271417029	SHAMEER KUMAR		<u> </u>
13	88231271417030	SIMRANJIT SINGH	<u></u>	 L
14	88231271417031	SUKHCHAIN	<u></u>	

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

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2311 / INDUSTRIAL TRAINING INSTITUTE ,NAWANSHEHAR

Course: 132 / ELECTRICIAN Class: Third

Subject: 99955 / TRADE PRACTICAL

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2311 / INDUSTRIAL TRAINING INSTITUTE ,NAWANSHEHAR

Course: 268 / WELDER (GMAW AND GTAW)

Class: Second

Subject: 99931 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.		
1	88268171417037	LAL CHAND		1		
2				<u></u>		
3						
Tot	Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge					
			Undertaki ng			
I (N abov have here	I (Name) hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.					
			Si gna	ture of the Invigilator		
I ha fill	ive conducted 20% rand ed correctly as per i	lom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been		
Name	e of the Superintender	nt	Si gna	ture of the Superintendent		
l ha fill	ive conducted 10% rand ed correctly as per i	lom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been		
Name	e of the Deputy Contro	oller	Si gna	ture of the Deputy Controller		
l h fill	nave conducted 5% rand ed correctly as per i	dom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been		
Name	e of the Controller		Si gna	ture of the Controller		

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2311 / INDUSTRIAL TRAINING INSTITUTE ,NAWANSHEHAR

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

Subject: 99932 / WORKSHOP CAL. & SCIENCE

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2311 / INDUSTRIAL TRAINING INSTITUTE ,NAWANSHEHAR

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

Subject: 99933 / ENGINEERING DRAWING

S.	.No Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88268171417037	LAL CHAND		
2				L
3				
4				
	Total No. Of Students in Total No. Of Answer Sho Name and Signature Of		ent: Undertaki ng	
	I (Name)	(Designation)	G	ereby certify that I have conducted the particulars of all the students who
	have appeared under my si	upervision in today's exam, have any mistakes are found, I will i	been filled and sha	ded correctly in the UMR sheets. I also
			Si gnat	ure of the Invigilator
	I have conducted 20% rand filled correctly as per i	dom checking of the OMR sheet of instructions.	the said examinatio	n and found that particulars have been
	Name of the Superintender	nt	Si gnat	ure of the Superintendent
	I have conducted 10% rand filled correctly as per i	dom checking of the OMR sheet of instructions.	the said examinatio	n and found that particulars have been
	Name of the Deputy Contro	oller	Si gnat	ure of the Deputy Controller
	I have conducted 5% rand filled correctly as per i	dom checking of the OMR sheet of instructions.	the said examinatio	n and found that particulars have been
	Name of the Controller		Si gnat	ure of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2311 / INDUSTRIAL TRAINING INSTITUTE , NAWANSHEHAR

Course : 268 / WELDER (GMAW AND GTAW)

Class: Second

99977 / EMPLOYABILITY SKILLS Subject:

Name of the Controller

Name Of the Student | Answer Sheet No. S.No Student's Sign. Regd. No. 88268171417037 | LAL CHAND 88268171417042 | SUKHPREET Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2311 / INDUSTRIAL TRAINING INSTITUTE, NAWANSHEHAR

Course: 370 / ART & CRAFTS Class: First

Subject: 17073 / GEOMETRICAL DRAWING

88370128117005 | DEEPIKA

PAGE: 1

3

S.No	Regd. No.	Name Of	the Student	Answer Sheet No.	Student's Sign.
1	88370128117001 ,	AKSHAY THA	KUR		
2 ,	88370128117002 _{- 4}	 ДСНД РДNII			

88370128117009 | MANISHA | 88370128117010 | MONIKA RANI

88370128117011 PRIYA

11 88370128117014 VIJAY THAKUR 12 88370128117015 VIRENDER 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 PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2311 / INDUSTRIAL TRAINING INSTITUTE , NAWANSHEHAR Center Name: Course: 370 / ART & CRAFTS 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 Undertaki ng

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

Signature of the Invigilator

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Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

2311 / INDUSTRIAL TRAINING INSTITUTE ,NAWANSHEHAR Center Name:

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	88370128116002	BABU RAM				
2	88370128116004	HARKANWAL DHIR	<u> </u>			
3	88370128116007	JASVIR KAUR	<u> </u>	<u></u>		
4	88370128116008	NEEL AM DANI	<u> </u>			
5	88370128116011	RAMANDEEP KAUR	<u> </u>	<u> </u>		
6	88370928115013	SAHIL GANGER	<u> </u>			
7	88370928115014	SUKHWINDER SINGH		<u> </u>		
Tot	al No. Of Answer She me and Signature Of					
			Undertaki ng			
I (N abov have here	lame) re examination as Invi e appeared under my su by undertake that if	(Designation) gilator. I have personally chec pervision in today's exam, have any mistakes are found, I will	h ked and ensured that been filled and sha not be entitled for	nereby certify that I have conducted the particulars of all the students who aded correctly in the OMR sheets. I also any remuneration.		
			Si gnat	cure of the Invigilator		
l ha fill	ve conducted 20% rand ed correctly as per i	lom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been		
Name	of the Superintender	t	Si gnat	ture of the Superintendent		
l ha fill	I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.					
Name	of the Deputy Contro	ller	Si gnat	cure of the Deputy Controller		
l h fill	ave conducted 5% rand ed correctly as per i	lom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been		
Name	of the Controller		Si gnat	cure of the Controller		

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 of ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Course : 111 / WELDER (GAS AND ELECTRIC) Class: Second 99931 / TRADE THEORY Subject: Name Of the Student | Answer Sheet No. S.No Student's Sign. Regd. No. 88212171117227 | SHAM LAL Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 111 / WELDER (GAS AND ELECTRIC)

Class: Second

Subject: 99933 / ENGINEERING DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88212171117219	DALJIT SINGH		
2	88212171117221	JATINDER KUMAR		
3	88212171117222	KARANDEEP SINGH	1	
4	88212171117223	LAKHVEER		
5	88212171117224	MOHIT KUMAR		
6	88212171117227	SHAM LAL		
7	88212171117230	YOGESH KUMAR		
	tal No. Of Answer She me and Signature Of			
			Undertaki ng	
I (N abov have here	Name) ve examination as Invi e appeared under my su eby undertake that if	(Designation) gilator. I have personally chec pervision in today's exam, have any mistakes are found, I will	cked and ensured thate been filled and shout be entitled for	hereby certify that I have conducted the t particulars of all the students who aded correctly in the OMR sheets. I also any remuneration.
			Si gna	ture of the Invigilator
l ha fill	ave conducted 20% rand ed correctly as per i	lom checking of the OMR sheet of nstructions.	the said examinati	on and found that particulars have been
Name	e of the Superintender	nt	Si gna	ture of the Superintendent
l ha fill	ave conducted 10% rand ed correctly as per i	lom checking of the OMR sheet of nstructions.	f the said examinati	on and found that particulars have been
Name	e of the Deputy Contro	ller	Si gna	ture of the Deputy Controller
	nave conducted 5% rand ed correctly as per i		f the said examinati	on and found that particulars have been
Name	e of the Controller		Si gna	ture of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name: Course : 113 / MECH. DIESEL Class: Second 99931 / TRADE THEORY Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88201171117241 | MANPREET SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 113 / MECH. DIESEL Class: Second

Subject: 99932 / WORKSHOP CAL. & SCIENCE

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88201171117231	AVTAR KRISHAN		
2	88201171117232	DEEPAK		1
3	88201171117233	DEEPAK	<u> </u>	1
4	88201171117234	GURPREET	L	1
5	88201171117241	MANPREET SINGH	L	
6	88201171117246	SATNAM	L	1
7	88201171117247	SUKHDEV SINGH		I
	al No. Of Answer Sheme and Signature Of			
			Undertaki ng	
nave	e appeared under mv st	(Designation) gilator. I have personally chec upervision in today's exam, have any mistakes are found, I will	been filled and sna	nereby certify that I have conducted the t particulars of all the students who aded correctly in the OMR sheets. I also any remuneration.
			Si gnat	ture of the Invigilator
l ha fill	ive conducted 20% rand ed correctly as per i	dom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been
Name	e of the Superintender	nt	Si gnat	ture of the Superintendent
l ha fill	ive conducted 10% rand ed correctly as per i	dom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been
Name	e of the Deputy Contro	oller	Si gnat	ture of the Deputy Controller
l h fill	nave conducted 5% ranc ed correctly as per i	dom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been
Name	e of the Controller		Si gnat	ture of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course : 113 / MECH. DIESEL Class: Second

99933 / ENGINEERING DRAWING Subject:

PAGE: 1 of

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88201171117234 | GURPREET 88201171117247 | SUKHDEV SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 113 / MECH. DIESEL Class: Second

Subject: 99977 / EMPLOYABILITY SKILLS

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88201171117231	AVTAR KRISHAN		
2	88201171117232	DEEPAK		1
3	88201171117233	DEEPAK		1
4	88201171117234	CUDDDEET		
5	88201171117241	MANPREET SINGH		1
6	88201171117246	SATNAM		1
7	88201171117247	SUKHDEV SINGH		
	al No. Of Answer Sheme and Signature Of			
			Undertaki ng	
I (N abov have here	lame) ve examination as Invi e appeared under my su bby undertake that if	(Designation)_ gilator. I have personally chec upervision in today's exam, have any mistakes are found, I will	ked and ensured that been filled and sha not be entitled for	nereby certify that I have conducted the t particulars of all the students who aded correctly in the OMR sheets. I also any remuneration.
			Si gna	ture of the Invigilator
I ha fill	ive conducted 20% rand ed correctly as per i	lom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been
Name	e of the Superintender	nt	Si gna	ture of the Superintendent
l ha fill	ive conducted 10% rand ed correctly as per i	lom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been
Name	e of the Deputy Contro	ller	Si gna	ture of the Deputy Controller
l h fill	nave conducted 5% ranc ed correctly as per i	dom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been
Name	e of the Controller		Si gna	ture of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 of ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course : 114 / PLUMBER Class: Second

99932 / WORKSHOP CAL. & SCIENCE Subject:

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88209171317011 | MANDIP SINGH 88209171317021 | RAVI Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 of ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course : 114 / PLUMBER Class: Second

99977 / EMPLOYABILITY SKILLS Subject:

Name of the Controller

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88209171317011 | MANDIP SINGH 88209171317021 | RAVI Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 125 / WIREMAN Class: First

Subject: 99911 / Trade Theory

PAGE: 1

S.No Regd. No. Name Of the Student Student's Sign. Answer Sheet No. 88232271117002 | AMANPREET SINGH 2 88232271117005 ASHOK KUMAR 3 88232271117011 | KAPAL DEV 5 88232271117017 | PARDEEP SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng hereby certify that I have conducted the (Designation) above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Controller Signature of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING
PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT
Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR
Course: 125 / WIREMAN Class: First
Subject: 99912 / WORKSHOP CAL. & SCIENCE

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88232271117005	JASHOK KUMAR		
2	88232271117017	JPARDEEP SINGH		
To	tal No. Of Students in tal No. Of Answer Sho me and Signature Of	eets Packed >	sent:	
			Undertaki ng	
hav	e appeared under my si	(Designation) gilator. I have personally checupervision in today's exam, have any mistakes are found, I will	e been filled and sh	hereby certify that I have conducted the t particulars of all the students who aded correctly in the OMR sheets. I also any remuneration.
			Si gna	ture of the Invigilator
l ha	ave conducted 20% rand led correctly as per i	dom checking of the OMR sheet of nstructions.	f the said examinati	on and found that particulars have been
Name	e of the Superintender	nt	Si gna	ture of the Superintendent
	ave conducted 10% rand led correctly as per i		f the said examinati	on and found that particulars have been
Name	e of the Deputy Contro	ol I er	Si gna	ture of the Deputy Controller
	have conducted 5% rand Led correctly as per i		f the said examinati	on and found that particulars have been

Signature of the Controller

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING
PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 125 / WIREMAN Class: First

Subject: 99913 / ENGINEERING DRAWING

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88232271117005 | ASHOK KUMAR 88232271117017 | PARDEEP SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent

Name of the Deputy Controller

filled correctly as per instructions.

Signature of the Deputy Controller

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

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been

Name of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 125 / WIREMAN Class: First

Subject: 99966 / EMPLOYABILITY SKILLS

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88232271117002	AMANPREET SINGH	<u> </u>	
2	88232271117005	ASHOK KUMAR	<u> </u>	<u> </u>
3	88232271117011	KAPAL DEV	<u> </u>	
4		LAKUMANDED CINICII		<u> </u>
5	88232271117017	PARDEEP SINGH	<u> </u>	
I (N	me and Signature Of Jame) Ve examination as Invi	(Designation)	Undertaking ———————————————————————————————————	nereby certify that I have conducted the t particulars of all the students who
have here	e appeared under my subby undertake that if	upervision in today's exam, have any mistakes are found, I will	been filled and sha not be entitled for	aded correctly in the OMR sheets. I also any remuneration.
			Si gna	ture of the Invigilator
l ha fill	ave conducted 20% rand ed correctly as per i	dom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been
Name	e of the Superintender	nt	Si gna	ture of the Superintendent
l ha fill	ave conducted 10% rand ed correctly as per i	dom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been
Name	e of the Deputy Contro	oller	Si gnat	ture of the Deputy Controller
l h fill	nave conducted 5% rand ed correctly as per i	dom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been
Name	e of the Controller		Si gnat	ture of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 125 / WIREMAN Class: Second

Subject: 99931 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.	
1	88232271117005	ASHOK KUMAR		<u>L</u>	
2	88232271117012				
3	88232271117014	.MEHIII			
4	88232271117016	NAMPAL SINGH	<u> </u>		
5		DADDEED 01/10/1			
6	88232271117021	0111/11551/5011/15			
Na	me and Signature Of	Incharge	Undertaki ng		
	tal No. Of Answer She me and Signature Of				
abòv	Name) ve examination as Invi	(Designation) gilator. I have personally chec	ked and ensured that	nereby certify that I have conducted the particulars of all the students who	
have here	e appeared under my su eby undertake that if	upervision in today's exam, have any mistakes are found, I will	been filled and sha not be entitled for	nded correctly in the OMR sheets. I also any remuneration.	
			Si gnat	cure of the Invigilator	
l ha fill	ave conducted 20% rand ed correctly as per i	dom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been	
Name	e of the Superintender	nt	Si gnat	cure of the Superintendent	
l ha fill	I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.				
Name	e of the Deputy Contro	oller	Si gnat	cure of the Deputy Controller	
l h fill	nave conducted 5% rand ed correctly as per i	dom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been	
Name	e of the Controller		Si gnat	cure of the Controller	

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 125 / WIREMAN Class: Second

Subject: 99933 / ENGINEERING DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88232271117012	LAKHWINDER SINGH		
2	88232271117014	MEHUL		
3	88232271117015	MOHIT KUMAR		
4	88232271117016	NAMPAL SINGH		
5	88232271117017	PARDEEP SINGH		
6	88232271117021	SUKHDEV PAWAR		
ivai	me and Signature Or	incharge	Undertaki ng	
Tot	al No. Of Students in al No. Of Answer She me and Signature Of	eets Packed >	sent:	
abòv have	appeared under my su	pervision in today's exam, have	cked and ensured tha e been filled and sh	hereby certify that I have conducted the t particulars of all the students who aded correctly in the OMR sheets. I also
here	by undertake that if	any mistakes are found, I will	not be entitled for	any remuneration.
			_	ture of the Invigilator
l ha fill	ve conducted 20% rand ed correctly as per i	lom checking of the OMR sheet on nstructions.	f the said examinati	on and found that particulars have been
Name	of the Superintenden	t	Si gna	ture of the Superintendent
l ha fill	ve conducted 10% rand ed correctly as per i	lom checking of the OMR sheet on nstructions.	f the said examinati	on and found that particulars have been
Name	of the Deputy Contro	ller	Si gna	ture of the Deputy Controller
l h fill	ave conducted 5% rand ed correctly as per i	lom checking of the OMR sheet on nstructions.	f the said examinati	on and found that particulars have been
Name	of the Controller		Si ana	ture of the Controller

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 125 / WIREMAN Class: Third

Name Of the Student

Subject: 99951 / TRADE THEORY

Regd. No.

S.No

0.110			7 (113Wei 311eet 146.	
1	88232271117002	JAMANPREET SINGH		
2	88232271117005	ASHOK KUMAR	<u> </u>	L
3	88232271117009	HARPINDER KUMAR	<u> </u>	L
4	88232271117010	JATINDER SAINI	<u> </u>	L
5	88232271117011	JKAPAL DEV	<u> </u>	L
6	88232271117012	LAKHWINDER SINGH	<u> </u>	L
7	88232271117014	_] MEHUL	<u> </u>	L
8	88232271117015	JMOHIT KUMAR	<u> </u>	L
9	88232271117016	NAMPAL SINGH	<u> </u>	L
10	88232271117017	PARDEEP SINGH	<u> </u>	L
11	88232271117021	SUKHDEV PAWAR	<u> </u>	L

Answer Sheet No.

Student's Sign.

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
PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT
Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR
Course: 125 / WIREMAN Class: Third
Subject: 99951 / TRADE THEORY

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 125 / WIREMAN Class: Third

Subject: 99952 / WORKSHOP CAL. & SCIENCE

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88232271117002	AMANPREET SINGH	<u> </u>	L
2	88232271117005	ASHOK KUMAR	L	L
3	88232271117009	HARPINDER KUMAR	L	L
4	88232271117010	JATINDER SAINI	<u> </u>	L
5	88232271117011	KAPAL DEV	L	<u> </u>
6	88232271117012	LAKHWINDER SINGH	<u> </u>	<u> </u>
7	88232271117014	_] MEHUL	<u> </u>	<u> </u>
8	88232271117015	MOHIT KUMAR	<u> </u>	<u> </u>
9	88232271117016	NAMPAL SINGH	<u> </u>	<u> </u>
10	88232271117017	PARDEEP SINGH	<u> </u>	<u> </u>
11	88232271117021	SUKHDEV PAWAR	<u> </u>	<u> </u>

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 PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 125 / WIREMAN Class: Third

Subject: 99952 / WORKSHOP CAL. & SCIENCE

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 125 / WIREMAN Class: Third

Subject: 99953 / ENGINEERING DRAWING

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88232271117002	AMANPREET SINGH		L
2	88232271117005	JASHOK KUMAR		<u> </u>
3	88232271117009	HARPINDER KUMAR		<u> </u>
4	88232271117010	JATINDER SAINI		L
5 	8823227111701	KAPAL DEV		L
6	88232271117012	LAKHWINDER SINGH	<u> </u>	<u> </u>
7	88232271117014	¹ _I MEHUL	<u> </u>	<u> </u>
8	88232271117015	MOHIT KUMAR	<u> </u>	<u> </u>
9	88232271117016	NAMPAL SINGH		<u> </u>
10	88232271117017	PARDEEP SINGH	<u> </u>	<u> </u>
11	8823227111702	SUKHDEV PAWAR		1

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 PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name : 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 125 / WIREMAN Class: Third

Subject: 99953 / ENGINEERING DRAWING

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 125 / WIREMAN Class: Third

Subject: 99955 / TRADE PRACTICAL

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88232271117002	AMANPREET SINGH	<u> </u>	<u></u>
2	88232271117005	ASHOK KUMAR	<u> </u>	L
3	88232271117009	HARPINDER KUMAR	<u> </u>	L
4	88232271117010	JATINDER SAINI	<u> </u>	L
5	88232271117011	KAPAL DEV	<u> </u>	L
6	88232271117012	LAKHWINDER SINGH	<u> </u>	L
7	88232271117014	MEHUL	<u> </u>	L
8	88232271117015	MOHIT KUMAR	<u> </u>	L
9	88232271117016	NAMPAL SINGH	<u> </u>	L
10	88232271117017	PARDEEP SINGH		L
11	88232271117021	SUKHDEV PAWAR	<u> </u>	L

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

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING
PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT
Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR
Course: 125 / WIREMAN Class: Third
Subject: 99955 / TRADE PRACTICAL

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name: Course: 126 / MECH. MOTOR VEHICLE Class: Second 99933 / ENGINEERING DRAWING Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88215271116189 | MANJIT SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name: Course : 128 / FITTER Class: Third 99955 / TRADE PRACTICAL Subject: Name Of the Student S.No Student's Sign. Regd. No. Answer Sheet No. 88227371315006 | RAHUL Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been

Name of the Controller

Name of the Deputy Controller

filled correctly as per instructions.

PAGE: 1 of

Signature of the Controller

Signature of the Deputy Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 128 / FITTER Class: Fourth

Subject: 99971 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.		
1	88227274316003	ATUL DAROCH	<u> </u>	<u></u>		
2	88227274316007			<u> </u>		
3				L		
4				<u></u>		
I (abo hav	Name and Signature Of Incharge Undertaking I (Name) hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also					
пег	hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator					
I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.						
Nam	e of the Superintenden	t	Signature of the Superintendent			
I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.						
Name of the Deputy Controller			Signature of the Deputy Controller			
l fil	I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.					
Nam	e of the Controller		Si gnat	ure of the Controller		

2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name: Course : 128 / FITTER Class: Fourth 99972 / WORKSHOP CAL. & SCIENCE Subject: Name Of the Student S.No Student's Sign. Regd. No. Answer Sheet No. 88227371315006 | RAHUL Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of

2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name: Course : 128 / FITTER Class: Fourth 99973 / ENGINEERING DRAWING Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88227274316010 | NISHANT Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Name of the Deputy Controller Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of

2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name: Course : **129 / TURNER** Class: First 99912 / WORKSHOP CAL. & SCIENCE Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88221271117023 | AJAY KUMAR Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Name of the Deputy Controller Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1

2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name: Course : **129 / TURNER** Class: First 99913 / ENGINEERING DRAWING Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88221271117023 | AJAY KUMAR Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Name of the Deputy Controller Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS - SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 129 / TURNER Class: Second

Subject: 99932 / WORKSHOP CAL. & SCIENCE

PAGE: 1 of

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. $88221271117023_{\mathsf{I}}\mathsf{AJAY}\;\mathsf{KUMAR}$ 88221271117026 | BALJINDER SINGH 3 88221271117029 | HARSIMRAN SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Controller Signature of the Controller

2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name: Course : **129 / TURNER** Class: Second 99933 / ENGINEERING DRAWING Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88221271117023 | AJAY KUMAR Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been

Signature of the Deputy Controller

Signature of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 1 of

Name of the Deputy Controller

Name of the Controller

filled correctly as per instructions.

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 129 / TURNER Class: Second

Subject: 99977 / EMPLOYABILITY SKILLS

S.No		Regd. No.		Name Of the Student	Answer Sheet No.	Student's Sign.	
1		88221271117023	JAJAY	KUMAR			
2							
3							
Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaking							
I (Name) hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.							
· ·				Si gna	ature of the Invigilator		
I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.							
Nan	Name of the Superintendent Signature of the Superintendent				ture of the Superintendent		
l h fil	I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.						
Nan	ne of	the Deputy Contr	oller		Si gna	ture of the Deputy Controller	
l fi l	have I ed	e conducted 5% rar correctly as per	ndom che instruc	cking of the OMR sheet tions.	of the said examination	on and found that particulars have been	
Nan	ne of	the Controller			Si gna	ture of the Controller	

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 129 / TURNER Class: Third

Subject: 99951 / TRADE THEORY

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88221271117023	JAJAY KUMAR	<u> </u>	<u></u>
2	88221271117026	BALJINDER SINGH		L
3	88221271117027	CHHOTU KUMAR DEV		L
4	88221271117028	GURSHARANJIT SINGH		L
5 	88221271117029	HARSIMRAN SINGH	<u> </u>	L
6	88221271117032	PARVEEN KUMAR		L
7	88221271117033	_] RAJJAT	<u> </u>	L
8	88221271117034	RANVIR SINGH	<u> </u>	L
9	88221271117035	SUKHWINDER RAI	<u></u>	L
10	88221271117037	SAJAN KUMAR		

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

Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name: Course: **129 / TURNER** Class: Third

99951 / TRADE THEORY Subject:

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 129 / TURNER Class: Third

Subject: 99952 / WORKSHOP CAL. & SCIENCE

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88221271117023	JAJAY KUMAR		
2	88221271117026	BALJINDER SINGH		L
3	88221271117027	CHHOTU KUMAR DEV		 [
4	88221271117028	GURSHARANJIT SINGH	<u> </u>	L
5	88221271117029	HARSIMRAN SINGH	<u> </u>	L
6	88221271117032	PARVEEN KUMAR	<u> </u>	L
7	88221271117033	RAJJAT	<u> </u>	L
8	88221271117034	RANVIR SINGH	<u> </u>	L
9	88221271117035	SUKHWINDER RAI	 	
10	88221271117037	SAJAN KUMAR		L

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

Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name:

Course: **129 / TURNER** Class: Third

99952 / WORKSHOP CAL. & SCIENCE Subject:

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 129 / TURNER Class: Third

Subject: 99953 / ENGINEERING DRAWING

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88221271117023	JAJAY KUMAR		
2	88221271117026	BALJINDER SINGH		<u> </u>
3	88221271117027	CHHOTU KUMAR DEV		 [
4	88221271117028	GURSHARANJIT SINGH	<u> </u>	L
5	88221271117029	HARSIMRAN SINGH	<u> </u>	L
6	88221271117032	PARVEEN KUMAR	<u> </u>	L
7	88221271117033	RAJJAT	<u> </u>	L
8	88221271117034	RANVIR SINGH		L
9	88221271117035	SUKHWINDER RAI	<u></u>	L
10	88221271117037	SAJAN 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 PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 129 / TURNER Class: Third

Subject: 99953 / ENGINEERING DRAWING

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 129 / TURNER Class: Third

Subject: 99955 / TRADE PRACTICAL

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	8822127111702	³ _J AJAY KUMAR		
2	8822127111702	⁶ BALJINDER SINGH	1	L
3	8822127111702	7 _J CHHOTU KUMAR DEV		L
4	8822127111702	³ GURSHARANJIT SINGH		L
5 	8822127111702	9 _J HARSIMRAN SINGH	<u> </u>	L
6	8822127111703	2 _J PARVEEN KUMAR		L
7	8822127111703	3 RAJJAT		L
8	8822127111703	⁴ _J RANVIR SINGH		L
9	8822127111703	SUKHWINDER RAI	<u></u>	
10	8822127111703	7 SAJAN KUMAR	1	

Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING
PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT
Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR
Course: 129 / TURNER Class: Third
Subject: 99955 / TRADE PRACTICAL

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

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

Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 132 / ELECTRICIAN Class: Second

Subject: 99931 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.		
1	88231271317042	SUKHWINDER SINGH		<u></u>		
2	88231271317045	JVINIT KUMAR		<u> </u>		
3	88231271317047	LOVEDEEP SINGH		<u> </u>		
Tot	tal No. Of Students in tal No. Of Answer Sho me and Signature Of	eets Packed >	sent: Undertaki ng			
I (N abov have here	Name) ve examination as Invi e appeared under my su eby undertake that if	(Designation) gilator. I have personally chec upervision in today's exam, have any mistakes are found, I will		ereby certify that I have conducted the particulars of all the students who ded correctly in the OMR sheets. I also any remuneration.		
			Si gnat	ure of the Invigilator		
l ha fill	ave conducted 20% rand ed correctly as per i	dom checking of the OMR sheet of nstructions.	the said examination	n and found that particulars have been		
Name	e of the Superintender	nt	Si gnat	ure of the Superintendent		
l ha fill	I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.					
Name	e of the Deputy Contro	oller	Si gnat	ure of the Deputy Controller		
l h fill	nave conducted 5% rand ed correctly as per i	dom checking of the OMR sheet of nstructions.	the said examination	n and found that particulars have been		
Name	e of the Controller		Si gnat	ure of the Controller		

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name: Course : 132 / ELECTRICIAN Class: Second 99932 / WORKSHOP CAL. & SCIENCE Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88231271317042 | SUKHWINDER SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 132 / ELECTRICIAN Class: Second

Subject: 99933 / ENGINEERING DRAWING

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231271317028	BALJEET SINGH	<u> </u>	L
2	88231271317031	GURWINDER SINGH	L	L
3	88231271317033	HIMMAT CHAND	L	L
4	88231271317034	JORA SINGH		
5	88231271317035	MALKIT SINGH		
6	88231271317036	NABJIT SINGH		
7	88231271317037	NITIN SINGH	<u> </u>	L
8	88231271317042	SUKHWINDER SINGH	<u> </u>	L
9	88231271317043	SURAJ	L	L
10	88231271317045	VINIT KUMAR		L
11	88231271317047	LOVEDEEP 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 PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name:

Course: 132 / ELECTRICIAN Class: Second

99933 / ENGINEERING DRAWING Subject:

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name: Course : 132 / ELECTRICIAN Class: Second 99977 / EMPLOYABILITY SKILLS Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88231271317042 | SUKHWINDER SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 132 / ELECTRICIAN Class: Third

Subject: 99951 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231271317028	BALJEET SINGH	<u> </u>	<u></u>
2	88231271317029	BHOOP SINGH	<u> </u>	L
3	88231271317030	DAVINDER SINGH	<u> </u>	L
4	88231271317031	GURWINDER SINGH	<u> </u>	L
5 	88231271317032	HARPREET SINGH	<u> </u>	L
6	88231271317033	HIMMAT CHAND	<u> </u>	L
7	88231271317034	JORA SINGH	<u> </u>	L
8	88231271317035	_J MALKIT SINGH	<u> </u>	L
9	88231271317036	NABJIT SINGH	<u> </u>	L
10	88231271317037	_J NITIN SINGH	<u> </u>	L
11	88231271317040	RAJJAT GARG	<u> </u>	L
12	88231271317042	SUKHWINDER SINGH		L
13	88231271317043	SURAJ		L
14	88231271317044	JVINAY KUMAR		L
15	88231271317045	JVINIT KUMAR		L
16	88231271317047	LOVEDEEP SINGH		

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name:

Course: 132 / ELECTRICIAN Class: Third

99951 / TRADE THEORY Subject:

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 132 / ELECTRICIAN Class: Third

Subject: 99952 / WORKSHOP CAL. & SCIENCE

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231271317028	BALJEET SINGH		<u> </u>
2	88231271317029	BHOOP SINGH	<u> </u>	<u> </u>
3	88231271317030	DAVINDER SINGH	<u> </u>	<u> </u>
4	88231271317031	GURWINDER SINGH	<u> </u>	<u> </u>
5 	88231271317032	HARPREET SINGH	<u> </u>	<u> </u>
6	88231271317033	HIMMAT CHAND	<u> </u>	<u> </u>
7	88231271317034	JORA SINGH	<u> </u>	<u> </u>
8	88231271317035	MALKIT SINGH		L
9	88231271317036	NABJIT SINGH	<u> </u>	<u>L</u>
10	88231271317037	_J NITIN SINGH	<u> </u>	<u> </u>
11	88231271317040	RAJJAT GARG		L
12	88231271317042	SUKHWINDER SINGH		L
13	88231271317043	SURAJ		L
14	88231271317044	VINAY KUMAR		L
15	88231271317045	VINIT KUMAR		L
16	88231271317047	LOVEDEEP SINGH		

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

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name:

Course: 132 / ELECTRICIAN Class: Third

99952 / WORKSHOP CAL. & SCIENCE Subject:

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 132 / ELECTRICIAN Class: Third

Subject: 99953 / ENGINEERING DRAWING

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231271317028	BALJEET SINGH	<u> </u>	<u></u>
2	88231271317029	BHOOP SINGH	<u> </u>	L
3	88231271317030	DAVINDER SINGH	<u> </u>	L
4	88231271317031	GURWINDER SINGH	<u> </u>	L
5	88231271317032	HARPREET SINGH	<u> </u>	L
6	88231271317033	HIMMAT CHAND	<u> </u>	L
7	88231271317034	JORA SINGH	<u> </u>	L
8	88231271317035	MALKIT SINGH	<u> </u>	L
9	88231271317036	NABJIT SINGH	<u> </u>	L
10	88231271317037	_J NITIN SINGH	<u> </u>	L
11	88231271317040	RAJJAT GARG	<u> </u>	L
12	88231271317042	SUKHWINDER SINGH		L
13	88231271317043	SURAJ		L
14	88231271317044	JVINAY KUMAR		L
15 	88231271317045		<u> </u>	L
16	88231271317047	LOVEDEEP SINGH	<u></u>	

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 PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 132 / ELECTRICIAN Class: Third

Subject: 99953 / ENGINEERING DRAWING

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 132 / ELECTRICIAN Class: Third

Subject: 99955 / TRADE PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231271317028	BALJEET SINGH	<u> </u>	<u></u>
2	88231271317029	BHOOP SINGH	<u> </u>	L
3	88231271317030	DAVINDER SINGH	<u> </u>	L
4	88231271317031	GURWINDER SINGH	<u> </u>	L
5 	88231271317032	HARPREET SINGH	<u> </u>	L
6	88231271317033	HIMMAT CHAND	<u> </u>	L
7	88231271317034	JORA SINGH	<u> </u>	L
8	88231271317035	_J MALKIT SINGH	<u> </u>	L
9	88231271317036	NABJIT SINGH	<u> </u>	L
10	88231271317037	_J NITIN SINGH	<u> </u>	L
11	88231271317040	RAJJAT GARG	<u> </u>	L
12	88231271317042	SUKHWINDER SINGH		L
13	88231271317043	SURAJ		L
14	88231271317044	JVINAY KUMAR		L
15	88231271317045	JVINIT KUMAR		L
16	88231271317047	LOVEDEEP SINGH		

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

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name: Course: 132 / ELECTRICIAN Class: Third

99955 / TRADE PRACTICAL Subject:

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

Class: First

Signature of the Controller

1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 143 / DRAUGHTSMAN (CIVIL)

Subject: 99911 / Trade Theory

PAGE: 1

S.No Regd. No. Name Of the Student Student's Sign. Answer Sheet No. 88217271117054 | PARWINDER KUMAR 88217271117055 PRABHJOT SINGH 2 3 88217271117060 | SANJEET KUMAR 5 88217271117062 _ISAJAN BADHAN Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng hereby certify that I have conducted the (Designation) above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been

filled correctly as per instructions.

Name of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

143 / DRAUGHTSMAN (CIVIL)

Course: Class: First

Subject: 99966 / EMPLOYABILITY SKILLS

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88217271117054	PARWINDER KUMAR		
2	88217271117055	PRABHJOT SINGH		
3	88217271117058	SANAMDEEP SINGH		
4	88217271117060	SANJEET KUMAR		
5	88217271117062	SAJAN BADHAN		
1) I	me and Signature Of Name) ve examination as Invi	(Designation)_ gilator. I have personally ch	Undertaking	hereby certify that I have conducted the t particulars of all the students who
have	e appeared under my si	upervision in today's exam, ha	ive been filled and sh	aded correctly in the UMR sheets. I also
пег	eby undertake that in	any mistakes are found, I wil		ture of the Invigilator
l ha fill	ave conducted 20% rand led correctly as per i	dom checking of the OMR sheet nstructions.	of the said examinati	on and found that particulars have been
Name	e of the Superintende	nt	Si gna	ture of the Superintendent
l ha fill	ave conducted 10% rand led correctly as per i	dom checking of the OMR sheet nstructions.	of the said examinati	on and found that particulars have been
Name	e of the Deputy Contro	oller	Si gna	ture of the Deputy Controller
l l fill	nave conducted 5% rand led correctly as per i	dom checking of the OMR sheet nstructions.	of the said examinati	on and found that particulars have been
Name	e of the Controller		Si gna	ture of the Controller

2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 143 / DRAUGHTSMAN (CIVIL) Class: Second

Subject: 99931 / TRADE THEORY

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88217271117042	HARPREET KAUR		
2	88217271117043	HARWINDER KUMAR	<u> </u>	<u> </u>
3	88217271117045	JASVINDER SINGH	<u> </u>	<u> </u>
4	88217271117050	MANGESHWAR SINGH	<u> </u>	L
5	88217271117051	NAVDEEP KAUR	<u> </u>	<u> </u>
6	88217271117053	PARDEEP SINGH		<u> </u>
7	88217271117055	PRABHJOT SINGH	<u> </u>	L
8	88217271117056	RAJVIR SINGH	<u> </u>	<u> </u>
9	88217271117057	SAHIL DROCH	<u> </u>	L
10	88217271117058	SANAMDEEP SINGH	<u> </u>	<u> </u>
11	88217271117059	SANDIP KAUR	<u> </u>	<u> </u>
12	88217271117060	SANJEET KUMAR	<u>[</u>	<u> </u>
13	88217271117062	SAJAN BADHAN	<u> </u>	<u> </u>
14	88217271117063	JVIJAY	<u> </u>	
i				

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

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name: Course: 143 / DRAUGHTSMAN (CIVIL) Class: Second Subject: 99931 / TRADE THEORY Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) ____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent

filled correctly as per instructions. Name of the Deputy Controller

Signature of the Deputy Controller

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

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been

Name of the Controller

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Course : 143 / DRAUGHTSMAN (CIVIL) Class: Second 99932 / WORKSHOP CAL. & SCIENCE Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88217271117058 | SANAMDEEP SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been

Signature of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 1

No.Of Students On This Page >> Present>> Absent >> Name Of Invigilator Signature Of Invigilator

filled correctly as per instructions.

Name of the Controller

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Course : 143 / DRAUGHTSMAN (CIVIL) Class: Second 99977 / EMPLOYABILITY SKILLS Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88217271117058 | SANAMDEEP SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been

Signature of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 1

No.Of Students On This Page >> Present>> Absent >> Name Of Invigilator Signature Of Invigilator

filled correctly as per instructions.

Name of the Controller

Answer Sheet No.

Student's Sign.

2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

PAGE: 1

S.No

Regd. No.

Course: 143 / DRAUGHTSMAN (CIVIL) Class: Third

Name Of the Student

Subject: 99951 / TRADE THEORY

J.110			Allswei Sheet No.	
1	88217271117039	ARASHPREET KAUR	<u> </u>	<u></u>
2	88217271117042	HARPREET KAUR	<u> </u>	<u> </u>
3	88217271117043	HARWINDER KUMAR	<u> </u>	<u></u>
4	88217271117044	INDERPREET	<u> </u>	<u></u>
5	88217271117045	JASVINDER SINGH	<u> </u>	<u></u>
6	88217271117050	MANGESHWAR SINGH	<u> </u>	<u></u>
7	88217271117051	NAVDEEP KAUR	<u> </u>	L
8 	88217271117053	PARDEEP SINGH	<u> </u>	<u> </u>
9	88217271117054	PARWINDER KUMAR	<u> </u>	<u></u>
10	88217271117055	PRABHJOT SINGH	<u> </u>	<u> </u>
11	88217271117056	RAJVIR SINGH	<u> </u>	<u> </u>
12	88217271117057	SAHIL DROCH	<u> </u>	<u></u>
13	88217271117058	SANAMDEEP SINGH	<u> </u>	<u> </u>
14	88217271117059	SANDIP KAUR	<u> </u>	
15	88217271117060	SANJEET KUMAR	<u> </u>	<u> </u>
16	88217271117062	SAJAN BADHAN	<u> </u>	<u> </u>
17	88217271117063	VIJAY	<u> </u>	
		·	·	·

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 PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name: Course: 143 / DRAUGHTSMAN (CIVIL) Class: Third Subject: 99951 / TRADE THEORY Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 143 / DRAUGHTSMAN (CIVIL) Class: Third

Subject: 99952 / WORKSHOP CAL. & SCIENCE

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88217271117039	ARASHPREET KAUR	<u> </u>	<u> </u>
2	88217271117042	HARPREET KAUR	<u> </u>	<u> </u>
3	88217271117043	HARWINDER KUMAR	<u> </u>	<u> </u>
4	88217271117044	INDERPREET	<u> </u>	<u> </u>
5	88217271117045	JASVINDER SINGH	<u> </u>	<u> </u>
6	88217271117050	MANGESHWAR SINGH		<u> </u>
7	88217271117051	NAVDEEP KAUR	<u> </u>	<u> </u>
8	88217271117053	PARDEEP SINGH		L
9	88217271117054	PARWINDER KUMAR		L
10	88217271117055	PRABHJOT SINGH		L
11	88217271117056	RAJVIR SINGH	<u> </u>	<u> </u>
12	88217271117057	SAHIL DROCH		L
13	88217271117058	SANAMDEEP SINGH		L
14	88217271117059	SANDIP KAUR		L
15	88217271117060	SANJEET KUMAR		L
16	88217271117062	SAJAN BADHAN		<u> </u>
17	88217271117063	YALIVI		

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 PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name: Course: 143 / DRAUGHTSMAN (CIVIL) Class: Third Subject: 99952 / WORKSHOP CAL. & SCIENCE Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) ____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent

Name of the Deputy Controller

filled correctly as per instructions.

Signature of the Deputy Controller

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

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been

Name of the Controller

Answer Sheet No.

Student's Sign.

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

S.No

Regd. No.

Course: 143 / DRAUGHTSMAN (CIVIL)

Class: Third

Name Of the Student

Subject: 99955 / TRADE PRACTICAL

·		· ·		
1	88217271117039	ARASHPREET KAUR	<u> </u>	L
2	88217271117042	HARPREET KAUR	<u> </u>	L
3	88217271117043	HARWINDER KUMAR	<u> </u>	L
4	88217271117044	INDERPREET	<u> </u>	L
5	88217271117045	JASVINDER SINGH		L
6	88217271117050	MANGESHWAR SINGH		L
7	88217271117051	NAVDEEP KAUR	<u> </u>	L
8	88217271117053	PARDEEP SINGH		L
9	88217271117054	PARWINDER KUMAR		L
10	88217271117055	PRABHJOT SINGH		L
11	88217271117056	RAJVIR SINGH		L
12	88217271117057	SAHIL DROCH		L
13	88217271117058	SANAMDEEP SINGH	<u> </u>	L
14	88217271117059	SANDIP KAUR	<u> </u>	L
15	88217271117060	SANJEET KUMAR	<u></u>	<u> </u>
16	88217271117062	SAJAN BADHAN		L
17	88217271117063	VIJAY	<u></u>	

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 PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name: Course: 143 / DRAUGHTSMAN (CIVIL) Class: Third Subject: 99955 / TRADE PRACTICAL Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) ____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent

filled correctly as per instructions. Name of the Deputy Controller

Signature of the Deputy Controller

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

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Course : 151 / EMBROIDERY AND NEEDLE WORK Class: Second 99977 / EMPLOYABILITY SKILLS Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88249171217048 | LUTAN KUMARI Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 of ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Course : 165 / HAIR & SKIN CARE Class: First 99921 / TRADE THEORY Subject: Name Of the Student S.No Student's Sign. Regd. No. Answer Sheet No. 88239171217110 | TAMANNA Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator

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

Name of the Superintendent Signature of the Superintendent

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

Name of the Deputy Controller Signature of the Deputy Controller

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

Name of the Controller Signature of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 of ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name: Course : 165 / HAIR & SKIN CARE Class: First 99966 / EMPLOYABILITY SKILLS Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88239171217110 | TAMANNA Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

175 / CUTTING SEW. & EMB. TEACHER'S TRAINING

Course: Class: First

Subject: 17511 / PRINCIPLE OF EDUCATION

Name of the Controller

5	.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.		
1		88175175317002	ASHA RANI		L		
2			OUDDDEET WALLD		L		
Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge							
		Undertaki ng					
	I (Name) hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.						
				Si gnat	ure of the Invigilator		
I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.							
	Name	e of the Superintenden	nt	Si gnat	ure of the Superintendent		
	l ha fill	ave conducted 10% rand ed correctly as per i	lom checking of the OMR sheet of nstructions.	the said examinatio	n and found that particulars have been		
	Name	e of the Deputy Contro	ller	Si gnat	ure of the Deputy Controller		
	l h fill	nave conducted 5% rand ed correctly as per i	lom checking of the OMR sheet of nstructions.	`the said examinatio	n and found that particulars have been		

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 189 / INFORMATION TECH.& ELECT.SYS.MTN.

Class: Third

Subject: 99951 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88220271217111	AMANDEEP	<u> </u>	<u> </u>
2	88220271217114	BHARTI VERMA	<u> </u>	L
3	88220271217115	BINDU	<u> </u>	L
4	88220271217116	GURMINDER KAUR	<u> </u>	L
5 	88220271217117	ITOYL	<u> </u>	L
6	88220271217119	LAKHWINDER KAUR		L
7	88220271217120	MALKINDER KAUR		L
8	88220271217122	NUTAN SHARMA		L
9	88220271217123	PARVEEN		L
10	88220271217124	POOJA		L
11	88220271217125	POOJA RANI		L
12	88220271217126	PRIYANKA		L
13	88220271217127	PARDEEP KUMARI		L
14	88220271217129	REETA		L
15	88220271217130	SUKHVIR KAUR		L
16	88220271217131	SONIA	<u> </u>	L
17	88220271217132	TALWINDER KAUR	<u></u>	
	·	·		

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>> Name Of Invigilator Signature O Absent >> Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name: Course: 189 / INFORMATION TECH.& ELECT.SYS.MTN. Class: Third

Subject: 99951 / TRADE THEORY

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 189 / INFORMATION TECH.& ELECT.SYS.MTN.

Class: Third

99952 / WORKSHOP CAL. & SCIENCE Subject:

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88220271217111	JAMANDEEP	<u> </u>	<u> </u>
2	88220271217114	BHARTI VERMA	L	L
3	88220271217115	BINDU	L	L
4	88220271217116	GURMINDER KAUR	L	L
5 	88220271217117	ITOYL	L	L
6	88220271217119	LAKHWINDER KAUR	<u> </u>	L
7	88220271217120	MALKINDER KAUR	<u> </u>	L
8	88220271217122	NUTAN SHARMA	<u> </u>	L
9	88220271217123	PARVEEN	<u> </u>	L
10	88220271217124	POOJA	<u> </u>	L
11	88220271217125	POOJA RANI	<u> </u>	L
12	88220271217126	PRIYANKA	<u> </u>	L
13	88220271217127	PARDEEP KUMARI	<u> </u>	L
14	88220271217129	REETA	<u> </u>	L
15	88220271217130	SUKHVIR KAUR	<u> </u>	L
16	88220271217131	SONIA	L	
17	88220271217132	TALWINDER 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 PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name:

2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 189 / INFORMATION TECH.& ELECT.SYS.MTN. Class: Third

99952 / WORKSHOP CAL. & SCIENCE Subject:

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 189 / INFORMATION TECH.& ELECT.SYS.MTN.

Class: Third

Subject: 99953 / ENGINEERING DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88220271217111	JAMANDEEP	<u> </u>	
2	88220271217114	BHARTI VERMA	<u> </u>	L
3	88220271217115	BINDU	<u> </u>	L
4	88220271217116	GURMINDER KAUR	<u> </u>	L
5 	88220271217117	JYOTI	<u> </u>	L
6	88220271217119	LAKHWINDER KAUR	<u> </u>	L
7	88220271217120	MALKINDER KAUR	<u> </u>	L
8	88220271217122	NUTAN SHARMA	<u> </u>	L
9	88220271217123	PARVEEN	<u> </u>	L
10	88220271217124	POOJA	<u> </u>	L
11	88220271217125	POOJA RANI	<u> </u>	L
12	88220271217126	PRIYANKA		<u> </u>
13	88220271217127	PARDEEP KUMARI		L
14	88220271217129	REETA		L
15	88220271217130	SUKHVIR KAUR	<u> </u>	L
16	88220271217131	SONIA	 	<u> </u>
17	88220271217132	TALWINDER KAUR	<u></u>	

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>> Name Of Invigilator Signature O Absent >> Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name:

Course: 189 / INFORMATION TECH.& ELECT.SYS.MTN. Class: Third

99953 / ENGINEERING DRAWING Subject:

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 189 / INFORMATION TECH.& ELECT.SYS.MTN.

Class: Third

Subject: 99955 / TRADE PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88220271217111	JAMANDEEP	<u> </u>	L
2	88220271217114	_J BHARTI VERMA	<u> </u>	L
3	88220271217115	BINDU	<u> </u>	L
4	88220271217116	GURMINDER KAUR	<u> </u>	L
5	88220271217117	ITOYL	<u> </u>	L
6	88220271217119	LAKHWINDER KAUR	<u> </u>	L
7	88220271217120	MALKINDER KAUR	<u> </u>	L
8	88220271217122	NUTAN SHARMA	<u> </u>	L
9	88220271217123	PARVEEN	<u> </u>	L
10	88220271217124	_] POOJA	<u> </u>	L
11	88220271217125	POOJA RANI	<u> </u>	L
12	88220271217126	_] PRIYANKA	<u> </u>	L
13	88220271217127	PARDEEP KUMARI	<u> </u>	L
14	88220271217129	_] REETA		L
15	88220271217130	SUKHVIR KAUR	<u> </u>	L
16	88220271217131	SONIA	<u></u>	
17	88220271217132	TALWINDER 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 PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name:

Course: 189 / INFORMATION TECH.& ELECT.SYS.MTN. Class: Third

99955 / TRADE PRACTICAL Subject:

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Course : 189 / INFORMATION TECH.& ELECT.SYS.MTN. Class: Fourth 99973 / ENGINEERING DRAWING Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88220271216143 | SUNAINA DEVI Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 192 / CONSUMER ELECTRONICS Class: First

Subject: 99912 / WORKSHOP CAL. & SCIENCE

Name of the Controller

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88273271117066 | BALWINDER KUMAR 88273271117088 JASPREET SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 192 / CONSUMER ELECTRONICS Class: First

Subject: 99913 / ENGINEERING DRAWING

PAGE: 1 of

Name of the Controller

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88273271117066 | BALWINDER KUMAR 88273271117088 JASPREET SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 192 / CONSUMER ELECTRONICS Class: Second

Subject: 99932 / WORKSHOP CAL. & SCIENCE

PAGE: 1

S.No	Regd. No.		Name Of the Student	Answer Sheet No.	Student's Sign.
1	8827327111706	4	ABHISHEK		L
2	8827327111706	6	BALWINDER KUMAR		
3	8827327111706	7	BICKY	L	L
4	8827327111706	9	GURDEEP SINGH	L	L
5	8827327111707	1	HARMAN SINGH	<u> </u>	L
6	8827327111707	2]	HARMANDEEP SINGH	<u> </u>	L
7	8827327111707	4	INDERJIT INDWAR	<u> </u>	L
8	8827327111707	6	PUNEET	<u> </u>	L
9	8827327111708	1	SANJIV KUMAR	L	L
10	8827327111708	2]	SHIVOM	L	L
11	8827327111708	4	SOURAV SAINI	<u> </u>	L
12	8827327111708	5]	TAJINDER SINGH	L	L
13 _I	8827327111708	8 1	JASPREET SINGH	I	I

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING
PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT
Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR
Course: 192 / CONSUMER ELECTRONICS Class: Second

Subject: 99932 / WORKSHOP CAL. & SCIENCE

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

192 / CONSUMER ELECTRONICS

Course: Class: Second

Subject: 99933 / ENGINEERING DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.			
1	88273271117064	ABHISHEK					
2	88273271117071	LIA DAAAAL CINICII					
3	88273271117072	LIADMANIDEED CINICII		1			
4	88273271117081	CANLINARD					
5	88273271117084	COLIDAN CAINII					
6	88273271117085	TAJINDER SINGH					
7	88273271117088	JASPREET SINGH		1			
Tot	tal No. Of Answer She me and Signature Of		ent.				
			Undertaki ng				
I (N abov have here	I (Name) hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.						
			Si gna	ture of the Invigilator			
l ha fill	ave conducted 20% rand ed correctly as per i	dom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been			
Name	e of the Superintender	nt	Si gna	ture of the Superintendent			
	I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.						
Name	Name of the Deputy Controller Signature of the Deputy Controller						
	nave conducted 5% rand ed correctly as per i		the said examination	on and found that particulars have been			
Name	e of the Controller		Si gna	ture of the Controller			

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 192 / CONSUMER ELECTRONICS Class: Second

Subject: 99977 / EMPLOYABILITY SKILLS

S.No | Regd. No. | Name Of the Student | Answer Sheet No. | Student's Sign.

88273271117064 _| ABHISHEK 88273271117066 | BALWINDER KUMAR 3 88273271117067 | BICKY 88273271117069 | GURDEEP SINGH 5 88273271117071 | HARMAN SINGH 88273271117074 | INDERJIT INDWAR 88273271117076 | PUNEET 88273271117081 | SANJIV KUMAR 88273271117082_ISHIVOM 10 88273271117084 | SOURAV SAINI 12 88273271117085 | TAJINDER SINGH

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

88273271117088 JASPREET SINGH

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

13

No.Of Students On This Page >> Present>> Absent >> Name Of Invigilator Signature Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING
PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT
Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR
Course: 192 / CONSUMER ELECTRONICS Class: Second

Subject: 99977 / EMPLOYABILITY SKILLS

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

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Signature of the Invigilator

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Name of the Superintendent

Signature of the Superintendent

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Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 1 Center Name:

S.No

2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 192 / CONSUMER ELECTRONICS

Regd. No.

Class: Third

Name Of the Student

Subject: 99951 / TRADE THEORY

1	88273271117064	ABHISHEK	<u> </u>	
2	88273271117066	BALWINDER KUMAR	<u> </u>	L
3	88273271117067	BICKY	<u> </u>	L
4	88273271117069	GURDEEP SINGH	<u> </u>	L
5 	88273271117071	HARMAN SINGH		L
6	88273271117072	HARMANDEEP SINGH		<u> </u>
7	88273271117074	INDERJIT INDWAR	<u> </u>	L
8	88273271117076	PUNEET	<u> </u>	L
9	88273271117081	SANJIV KUMAR	<u> </u>	L
10	88273271117082	SHIVOM		L
11	88273271117083	SOURAV		L
12	88273271117084	SOURAV SAINI		
13	88273271117085	TAJINDER SINGH		<u></u>
14	88273271117088	JASPREET SINGH		

Answer Sheet No.

Student's Sign.

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

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb '2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 192 / CONSUMER ELECTRONICS Class: Third

Subject: 99951 / TRADE THEORY

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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Name of the Superintendent

Signature of the Superintendent

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Name of the Deputy Controller

Signature of the Deputy Controller

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Name of the Controller

2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

PAGE: 1

Course: 192 / CONSUMER ELECTRONICS Class: Third

Subject: 99952 / WORKSHOP CAL. & SCIENCE

S.No | Regd. No. | Name Of the Student | Answer Sheet No. | Student's Sign.

1	88273271117064	ABHISHEK		
2	88273271117066	BALWINDER KUMAR	<u> </u>	L
3	88273271117067	BICKY		
4	88273271117069	GURDEEP SINGH		
5	88273271117071	HARMAN SINGH		
6	88273271117072	HARMANDEEP SINGH		
7	88273271117074	INDERJIT INDWAR		
8	88273271117076	PUNEET		
9	88273271117081	SANJIV KUMAR		
10	88273271117082	SHIVOM		
11	88273271117083	SOURAV		
12	88273271117084	SOURAV SAINI		
13	88273271117085	TAJINDER SINGH		
14	88273271117088	JASPREET 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 PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name:

Course: 192 / CONSUMER ELECTRONICS Class: Third

Subject: 99952 / WORKSHOP CAL. & SCIENCE

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name:

Course: 192 / CONSUMER ELECTRONICS

Class: Third

Name Of the Student

Subject: 99953 / ENGINEERING DRAWING

Regd. No.

PAGE: 1

S.No

		' 		
1	88273271117064	ABHISHEK	<u> </u>	L
2	88273271117066	BALWINDER KUMAR		
3	88273271117067	BICKY		
4	88273271117069	GURDEEP SINGH		
5	88273271117071	HARMAN SINGH		
6	88273271117072	HARMANDEEP SINGH		
7	88273271117074	INDERJIT INDWAR		
8	88273271117076	PUNEET		
9	88273271117081	SANJIV KUMAR		
10	88273271117082	SHIVOM		
11	88273271117083	SOURAV		
12	88273271117084	SOURAV SAINI		
13	88273271117085	TAJINDER SINGH		
14	88273271117088	JASPREET SINGH		

Answer Sheet No.

Student's Sign.

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 PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name:

Course: 192 / CONSUMER ELECTRONICS Class: Third

99953 / ENGINEERING DRAWING Subject:

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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Signature of the Invigilator

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Name of the Superintendent

Signature of the Superintendent

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Name of the Deputy Controller

Signature of the Deputy Controller

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Name of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name:

Course: 192 / CONSUMER ELECTRONICS

Class: Third

Name Of the Student

Subject: 99955 / TRADE PRACTICAL

Regd. No.

PAGE: 1

S.No

1	88273271117064	ABHISHEK	<u> </u>	<u></u>
2	88273271117066	BALWINDER KUMAR	<u> </u>	L
3	88273271117067	BICKY	<u> </u>	L
4	88273271117069	GURDEEP SINGH	<u> </u>	L
5 	88273271117071	HARMAN SINGH	<u> </u>	L
6	88273271117072	HARMANDEEP SINGH		L
7	88273271117074	INDERJIT INDWAR		L
8	88273271117076	PUNEET	<u> </u>	L
9	88273271117081	SANJIV KUMAR		L
10	88273271117082	SHIVOM		I
11	88273271117083	SOURAV		
12	88273271117084	SOURAV SAINI		
13	88273271117085	TAJINDER SINGH		
14	88273271117088	 JASPREET SINGH	 	

Answer Sheet No.

Student's Sign.

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

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING
PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT
Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR
Course: 192 / CONSUMER ELECTRONICS Class: Third
Subject: 99955 / TRADE PRACTICAL

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

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Name of the Superintendent

Signature of the Superintendent

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Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 3 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 200 / MECHANIC AUTO ELECTRICAL & ELECTRONICS

Class: Second

Subject: 99931 / TRADE THEORY

Center Name:

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88203171117089	JAJAY KUMAR	<u> </u>	<u> </u>
2	88203171117090	AMANDEEP SINGH		L
3	88203171117091	JAMIT KUMAR		L
4	88203171117092	ABHISHEK RAMPAL		L
5 	88203171117093	BOBBY GANGER		<u> </u>
6	88203171117094	BUDH PARKASH		L
7	88203171117095	CHETAN KUMAR	<u> </u>	L
8	88203171117096	CHIRAG SHARMA		L
9	88203171117097	DIVYANSH KUMAR		<u> </u>
10	88203171117098	DALJIT SINGH		L
11	88203171117099	GAURAV		L
12	88203171117100	GURPREET SINGH		L
13	88203171117101	GURSHARAN SINGH	<u> </u>	L
14	88203171117102	HARMINDER SINGH		L
15 _	88203171117103	HARPREET SINGH		L
16	88203171117104	JAGDISH PARSHAD		L
17	88203171117105	JASDEEP SINGH		L
18	88203171117106	JATINDER SINGH		I
19	88203171117107	JATINDER SINGH		L
20	88203171117108	MAGANJOT SINGH		
21	88203171117109	MANDEEP		L
	0			

PAGE: 2 of 3 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 200 / MECHANIC AUTO ELECTRICAL & ELECTRONICS

Class: Second

Subject: 99931 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88203171117110	MANISH SHARMA	<u> </u>	<u> </u>
23	88203171117111	MANJIT SINGH	<u> </u>	<u> </u>
24	88203171117112	JMAYANK	<u> </u>	<u> </u>
25 	88203171117113	NAVNEET SINGH BHATTI	<u> </u>	<u> </u>
26 	88203171117115	PRABHJOT SINGH	<u> </u>	L
27 	88203171117116	RAHMAN KHAN	<u> </u>	<u> </u>
28 	88203171117119	SAHIL DADWAL	<u> </u>	L
29 	88203171117120	SATWINDER SINGH	<u> </u>	L
30	88203171117121	SHUBHAM	<u> </u>	<u> </u>
31	88203171117122	SIKANDER SINGH	<u> </u>	<u> </u>
32	88203171117123	SUKHJIT SINGH	<u> </u>	<u> </u>
33	88203171117124	SUKHRAJPREET SINGH	<u> </u>	<u> </u>
34	88203171117125	SUKHWINDER LAL	<u> </u>	<u> </u>
35 	88203171117126	JSURAJ KUMAR	<u> </u>	<u> </u>
36	88203171117127	TARLOK	<u> </u>	<u> </u>
37 	88203171117128	TARNPREET SINGH	<u> </u>	<u> </u>
38	88203171117129	_] YEESHAN	<u> </u>	<u> </u>
39	88203171117130	SANJEEV KUMAR	<u> </u>	<u> </u>

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

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

PAGE: 3 of 3 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name: Course: 200 / MECHANIC AUTO ELECTRICAL & ELECTRONICS Class: Second 99931 / TRADE THEORY Subject: Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

Name of the Deputy Controller

filled correctly as per instructions.

Signature of the Deputy Controller

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

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been

Name of the Controller

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 200 / MECHANIC AUTO ELECTRICAL & ELECTRONICS

Class: Second

Subject: 99933 / ENGINEERING DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88203171117097	DIVYANSH KUMAR	<u> </u>	<u> </u>
2	88203171117098	DALJIT SINGH	<u> </u>	<u> </u>
3	88203171117099	GAURAV		L
4	88203171117100	GURPREET SINGH		L
5 	88203171117101	GURSHARAN SINGH		<u> </u>
6	88203171117102	HARMINDER SINGH		<u> </u>
7	88203171117103	HARPREET SINGH	<u> </u>	<u> </u>
8	88203171117109	MANDEEP	<u> </u>	<u> </u>
9	88203171117113	NAVNEET SINGH BHATTI	<u> </u>	<u> </u>
10	88203171117115	PRABHJOT SINGH	<u> </u>	<u> </u>
11	88203171117116	RAHMAN KHAN	<u> </u>	<u> </u>
12 	88203171117119	SAHIL DADWAL		<u> </u>
13	88203171117120	SATWINDER SINGH	<u> </u>	<u> </u>
14	88203171117121	SHUBHAM	<u> </u>	<u> </u>
15 	88203171117122	SIKANDER SINGH		<u> </u>
16	88203171117123	SUKHJIT SINGH	<u></u>	<u> </u>
17	88203171117128	TARNPREET SINGH	<u></u>	

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

Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name: Course: 200 / MECHANIC AUTO ELECTRICAL & ELECTRONICS Class: Second 99933 / ENGINEERING DRAWING Subject: Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) ____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 of ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Course : 222 / COMP. OP. PROGRAM. ASSISTANT Class: First 99921 / TRADE THEORY Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88242571715010 | YUVRAJ SAINI Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 of ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Course : 222 / COMP. OP. PROGRAM. ASSISTANT Class: Second 99941 / TRADE THEORY Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88242171317097 | TWINKLE PAL Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name:

Course : 222 / COMP. OP. PROGRAM. ASSISTANT

Class: Second

99945 / TRADE PRACTICAL Subject:

Name of the Controller

PAGE: 1 of

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88242171317092 | SANDEEP KUMAR 88242171317094 SATISH KUMAR KAPOOR Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller

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

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Course : 222 / COMP. OP. PROGRAM. ASSISTANT Class: Second 99977 / EMPLOYABILITY SKILLS Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88242171317097 | TWINKLE PAL Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 264 / Computer Hardware and Network Maintenance

Class: Second

Subject: 99932 / WORKSHOP CAL. & SCIENCE

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88264171117136	KRISHAN SHARMA	<u> </u>	<u> </u>
2	88264171117137	KULWINDER KAUR	L	<u></u>
3	88264171117138	KOMAL JAMAL	L	L
4	88264171117139	LOVEPREET	L	L
5	88264171117148	SANJEEV KUMAR	L	L
6	88264171117149	SANJEEV KUMAR	<u> </u>	L
7	88264171117150	SARBJIT	L	L
8	88264171117151	SARBJIT SINGH	L	L
9	88264171117152	SUKHWINDER SINGH		L
Tot	tal No. Of Students in tal No. Of Answer She me and Signature Of		ent:	
			Undertaki ng	
I (N abov have here	lame) ve examination as Invi e appeared under my su eby undertake that if	(Designation) gilator. I have personally chec upervision in today's exam, have any mistakes are found, I will	h ked and ensured that been filled and sha not be entitled for	ereby certify that I have conducted the particulars of all the students who ded correctly in the OMR sheets. I also any remuneration.
			Si gnat	ure of the Invigilator
	ave conducted 20% rand ed correctly as per i		the said examinatio	n and found that particulars have been
Name	e of the Superintender	t	Si gnat	ure of the Superintendent
	ave conducted 10% rand ed correctly as per i		the said examinatio	n and found that particulars have been
Name	e of the Deputy Contro	ller	Si gnat	ure of the Deputy Controller
l h fill	nave conducted 5% rand ed correctly as per i	lom checking of the OMR sheet of nstructions.	the said examinatio	n and found that particulars have been
Name	e of the Controller		Si gnat	ure of the Controller

Class: Second

Signature of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name:

Name of the Controller

PAGE: 1

Course :

2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

264 / Computer Hardware and Network Maintenance

99933 / ENGINEERING DRAWING Subject:

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88264171117136 | KRISHAN SHARMA 88264171117137 | KULWINDER KAUR 3 88264171117138 | KOMAL JAMAL Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

264 / Computer Hardware and Network Maintenance

Course: Class: Second

Subject: 99977 / EMPLOYABILITY SKILLS

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.	
1	88264171117136	KRISHAN SHARMA		1	
2	88264171117137	KULWINDER KAUR		1	
3	88264171117138	KOMAL JAMAL		1	
4	88264171117139	LOVEPREET		1	
5	88264171117148	SANJEEV KUMAR		1	
6	88264171117149	SANJEEV KUMAR		1	
7	88264171117150	SARBJIT		1	
8	88264171117151	SARBJIT SINGH		1	
9	88264171117152	SUKHWINDER SINGH	 	1	
Tot	al No. Of Students in al No. Of Answer She me and Signature Of		ent:		
			Undertaki ng		
have	appeared under my su	(Designation) gilator. I have personally chec pervision in today's exam, have any mistakes are found, I will	been filled and sha	nereby certify that I have conducted the t particulars of all the students who aded correctly in the OMR sheets. I also any remuneration.	
			Si gnat	ture of the Invigilator	
l ha fill	ve conducted 20% rand ed correctly as per i	lom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been	
Name of the Superintendent			Signature of the Superintendent		
I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have bee filled correctly as per instructions.					
Name of the Deputy Controller			Signature of the Deputy Controller		
l h fill	ave conducted 5% ranc ed correctly as per i	lom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been	
Name	of the Controller		Si gnat	ture of the Controller	

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course : 275 / AUTOMOTIVE BODY REPAIR

Class: Second

99931 / TRADE THEORY Subject:

Name of the Controller

PAGE: 1 of

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88266171116112 | BLAL AHMAD 88266171117206 KARAN BHARDWAJ Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 275 / AUTOMOTIVE BODY REPAIR

Class: Second

Subject: 99933 / ENGINEERING DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.		
1	88266171117200	JAMIT KUMAR	<u> </u>	<u> </u>		
2	88266171117206	JKARAN BHARDWAJ	L	L		
3	88266171117207	KULDEEP SINGH	L	L		
4	88266171117208	JMOHIT KUMAR	<u> </u>	<u> </u>		
5	88266171117213	SAHIL KUMAR		<u> </u>		
6	88266171117214	SANDEEP				
7	88266171117216	SIDHARATH KAPILA				
8	88266171117218	YOGESH KUMAR				
Tot	tal No. Of Students in tal No. Of Answer Sho me and Signature Of		ent:			
			Undertaki ng			
I (N abov have here	Jame)_ ve examination as Invi e appeared under my su eby undertake that if	(Designation) gilator. I have personally chec upervision in today's exam, have any mistakes are found, I will	h ked and ensured that been filled and sha not be entitled for	nereby certify that I have conducted the particulars of all the students who inded correctly in the OMR sheets. I also any remuneration.		
				ure of the Invigilator		
l ha fill	I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.					
Name of the Superintendent Signature of the Superintendent						
I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have be filled correctly as per instructions.				on and found that particulars have been		
Name of the Deputy Controller			Si gnat	ure of the Deputy Controller		
l h fill	nave conducted 5% rand ed correctly as per i	dom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been		
Name	e of the Controller		Si gnat	ure of the Controller		

2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name: Course : 370 / ART & CRAFTS Class: First 17055 / CRAFT(T) Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88370175317014 | AKASHDEEP SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

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

Name of the Controller

Name of the Deputy Controller

PAGE: 1

Signature of the Controller

Signature of the Deputy Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 370 / ART & CRAFTS Class: First

Subject: 17073 / GEOMETRICAL DRAWING

Name of the Controller

S.No		Name Of the Student	Answer Sheet No.	Student's Sign.	
1	88370175317014	AKASHDEEP SINGH	<u> </u>		
2	88370175317016				
3				L	
4		TARLOCULAN CINICUL		<u> </u>	
Tot	Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaking				
				aded correctly in the OMR sheets. I also	
Here	by under take that in	any mistakes are round, i will		ture of the Invigilator	
I ha fill	ave conducted 20% rand ed correctly as per i	om checking of the OMR sheet of nstructions.	9	on and found that particulars have been	
Name	e of the Superintenden	t	Si gna	ture of the Superintendent	
l ha fill	ave conducted 10% rand ed correctly as per i	om checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been	
Name	e of the Deputy Contro	ller	Si gnat	ture of the Deputy Controller	
l h fill	nave conducted 5% rand ed correctly as per i	om checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been	

2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name: Course : 370 / ART & CRAFTS Class: Second 70070 / EDUCATIONAL PSYCHOLOGY Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88370175316009 | JASPREET SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been

Signature of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 1

No.Of Students On This Page >> Present>> Absent >> Name Of Invigilator Signature Of Invigilator

filled correctly as per instructions.

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA Center Name: Course : 119 / CARPENTER Class: Second 99933 / ENGINEERING DRAWING Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88206171516019 | RAJAT KUMAR Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent

filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

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

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been

Name of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 1 of 1 Center Name: 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course: 128 / FITTER Class: Third

Subject: 99953 / ENGINEERING DRAWING

S.No		Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1		88227271516134	ABHISHEK KUMAR		
2		88227271516135	ANIL KUMAR		<u> </u>
3		88227271516140	KHUSHWINDER SINGFH	<u> </u>	L
4		88227271516141	MANDEEP KUMAR	<u> </u>	L
5		88227271516143	MANDEEP SINGH	<u> </u>	L
6		88227271516144	MANISH KUMAR	<u> </u>	L
7		88227271516145	MANISH KUMAR		<u> </u>
8		88227271516149	RAVIDEEP SINGH		<u> </u>
9		88227271516150	RAVINDER KUMAR		
To	otal	No. Of Students in No. Of Answer She and Signature Of	eets Packed >	sent:	
				Undertaki ng	
I (abo hav her	Name ve a eby	e) examination as Invi opeared under my su undertake that if	(Designation) gilator. I have personally chec pervision in today's exam, have any mistakes are found, I will	hked and ensured that been filled and sha not be entitled for	nereby certify that I have conducted the particulars of all the students who ded correctly in the OMR sheets. I also any remuneration.
				Si gnat	ure of the Invigilator
		conducted 20% rand correctly as per i		the said examination	on and found that particulars have been
Nam	e o	f the Superintender	nt	Si gnat	ure of the Superintendent
l h fil	ave I ed	conducted 10% rand correctly as per i	lom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been
Nam	ie of	f the Deputy Contro	ller	Si gnat	ure of the Deputy Controller
l fi l	have I ed	e conducted 5% rand correctly as per i	lom checking of the OMR sheet of nstructions.	the said examinatio	on and found that particulars have been
Nam	e of	f the Controller		Si gnat	ure of the Controller

2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course: 128 / FITTER Class: Fourth

Subject: 99971 / TRADE THEORY

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88227271516134	ABHISHEK KUMAR	<u> </u>	<u> </u>
2	88227271516138	GURPREET SINGH	<u> </u>	<u> </u>
3	88227271516140	KHUSHWINDER SINGFH	<u> </u>	<u> </u>
4	88227271516141	MANDEEP KUMAR	<u> </u>	<u> </u>
5 	88227271516142	MANDEEP SINGH	<u> </u>	<u> </u>
6	88227271516144	MANISH KUMAR	<u> </u>	<u> </u>
7	88227271516145	MANISH KUMAR	<u> </u>	<u> </u>
8	88227271516146	PARKASH SINGH	<u> </u>	<u> </u>
9	88227271516147	RAHUL	<u> </u>	<u> </u>
10	88227271516149	RAVIDEEP SINGH	<u> </u>	<u> </u>
11	88227271516153	VED PARKASH	<u> </u>	L

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING
PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS - SCVT
Center Name: 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA
Course: 128 / FITTER Class: Fourth
Subject: 99971 / 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) ____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA Center Name: Course : 128 / FITTER Class: Fourth 99973 / ENGINEERING DRAWING Subject: Name Of the Student S.No Student's Sign. Regd. No. Answer Sheet No. 88227271516147 | RAHUL Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA Center Name: Course : 128 / FITTER Class: Fourth 99975 / TRADE PRACTICAL Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88227271516142 | MANDEEP SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been

Signature of the Deputy Controller

Signature of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

PAGE: 1

Name of the Deputy Controller

Name of the Controller

filled correctly as per instructions.

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA Center Name: Course : 132 / ELECTRICIAN Class: Second 99932 / WORKSHOP CAL. & SCIENCE Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88231271516028 | GAGANDEEP SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent

Name of the Deputy Controller

filled correctly as per instructions.

Signature of the Deputy Controller

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

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been

Name of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course: 132 / ELECTRICIAN Class: Second

Subject: 99933 / ENGINEERING DRAWING

PAGE: 1 of

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88231271516031 _| JOTI SAROOP $88231271516035_{\mathsf{I}}\mathsf{PAWAN}\;\mathsf{KUMAR}$ 3 88231271516036 | RAJAN KUMAR Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Controller Signature of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA Center Name: Course : 132 / ELECTRICIAN Class: Second 99977 / EMPLOYABILITY SKILLS Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88231271516028 | GAGANDEEP SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course: 132 / ELECTRICIAN Class: Fourth

Subject: 99971 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231271516031	JOTI SAROOP	<u> </u>	<u>L</u>
2				<u></u>
3	88231271516035	PAWAN KUMAR	L	<u> </u>
4	88231271516038	RAJINDER KUMAR	<u> </u>	<u> </u>
5	88231271516039	SAHIL		<u> </u>
I (N	Name and Signature Of Incharge Undertaking I (Name) hereby certify that I have conducted above examination as Invigilator. I have personally checked and ensured that particulars of all the students who			
have here	e appeared under my su eby undertake that if	ipervision in today's exam, have any mistakes are found, I will	been filled and sha not be entitled for	aded correctly in the OMR sheets. I also any remuneration.
			Si gnat	ture of the Invigilator
l ha fill	ave conducted 20% rand ed correctly as per i	dom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been
Name	e of the Superintender	nt	Si gnat	ture of the Superintendent
l ha fill	ave conducted 10% rand ed correctly as per i	dom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been
Name	e of the Deputy Contro	oller	Si gnat	ture of the Deputy Controller
l h fill	nave conducted 5% rand ed correctly as per i	dom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been
Name	e of the Controller		Si gnat	ture of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course: 132 / ELECTRICIAN Class: Fourth

Subject: 99973 / ENGINEERING DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231271516026	AMRITPAL SINGH		<u> </u>
2	88231271516031	JOTI SAROOP	<u> </u>	<u> </u>
3	88231271516032	KAMAL SINGH	<u> </u>	<u></u>
4	88231271516033	MANISH KUMAR	<u> </u>	L
5	88231271516035	PAWAN KUMAR	<u> </u>	<u>L</u>
6	88231271516036	RAJAN KUMAR		<u>L</u>
7	88231271516037	RAJEEV KUMAR	<u> </u>	<u>L</u>
8	88231271516038	RAJINDER KUMAR	<u> </u>	<u>L</u>
9	88231271516039	SAHIL		L
To	otal No. Of Students in otal No. Of Answer She ame and Signature Of	eets Packed >	sent:	
			Undertaki ng	
l abo hav her	(Name) ove examination as Invi ve appeared under my su reby undertake that if	(Designation) gilator. I have personally chec upervision in today's exam, have any mistakes are found, I will	h ked and ensured that been filled and sha not be entitled for	ereby certify that I have conducted the particulars of all the students who ded correctly in the OMR sheets. I also any remuneration.
			Si gnat	ure of the Invigilator
l l fil	nave conducted 20% rand led correctly as per i	dom checking of the OMR sheet of nstructions.	the said examinatio	n and found that particulars have been
Nar	me of the Superintender	nt	Si gnat	ure of the Superintendent
l l fil	nave conducted 10% rand led correctly as per i	dom checking of the OMR sheet of nstructions.	the said examinatio	n and found that particulars have been
Nar	me of the Deputy Contro	oller	Si gnat	ure of the Deputy Controller
l fil	have conducted 5% rand led correctly as per i	dom checking of the OMR sheet of nstructions.	the said examinatio	n and found that particulars have been
Nar	me of the Controller		Si gnat	ure of the Controller

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

139 / MECH. REF. & AIR CONDITIONING

Course: Class: First

Subject: 99912 / WORKSHOP CAL. & SCIENCE

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88218271517001	ABHISHEK THAKUR	<u> </u>	L
2	88218271517003	JAJAY KUMAR	<u> </u>	L
3	88218271517004	AKASH KUMAR	<u> </u>	L
4	88218271517005	JAMIT KUMAR	<u> </u>	L
5	88218271517008	JARAN KUMAR	<u> </u>	L
6	88218271517009	ATISH	<u> </u>	L
7	88218271517010	AMANDEEP SINGH	<u> </u>	L
8	88218271517013	BRAJINDER KUMAR	<u> </u>	L
9	88218271517021	LAKHWINDER SINGH	<u> </u>	L
10	88218271517023	MANPREET SINGH	<u> </u>	L
11	88218271517025	MUKESH KUMAR BHATIA	<u> </u>	L
12	88218271517027	NIKHIL SANGA	<u> </u>	L
13	88218271517028	NEERAJ CHOUDHARY	<u> </u>	L
14	88218271517029	PANKAJ CHOUDHARY	<u> </u>	L
15 	88218271517033	PARVINDER KUMAR	<u> </u>	L
16	88218271517035	_] RAHUL	<u> </u>	L
17	88218271517036	RAHUL KUMAR	<u> </u>	L
18	88218271517037	RAHUL SAROJ	<u> </u>	L
19	88218271517038	RAMAN CHAUDHARY	<u> </u>	L
20	88218271517039	RAMAN KUMAR	 	<u></u>
21	88218271517040	RAMDEV		L

Class: First

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 2 Center Name:

2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course:

139 / MECH. REF. & AIR CONDITIONING

99912 / WORKSHOP CAL. & SCIENCE Subject:

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88218271517041 _I RAVI KUMAR 23 88218271517042 | RAKESH KUMAR 24 88218271517046 _| SOHIL BARI 25 88218271517047 _ISUBHASH CHAND 26 88218271517048 _ISUJAN SINGH 27 88218271517050 | TONY KUMAR 28 882182/151/052₁YOGESH RAJU Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng (Designation)_ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Controller Signature of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

139 / MECH. REF. & AIR CONDITIONING

Course: Class: First

Subject: 99913 / ENGINEERING DRAWING

Center Name:

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88218271517001	ABHISHEK THAKUR	<u> </u>	<u> </u>
2	88218271517003	JAJAY KUMAR	<u> </u>	L
3	88218271517004	JAKASH KUMAR	<u> </u>	L
4	88218271517005	JAMIT KUMAR	<u> </u>	<u> </u>
5	88218271517008	JARAN KUMAR	<u> </u>	<u> </u>
6	88218271517009	ATISH	<u> </u>	<u> </u>
7	88218271517010	AMANDEEP SINGH	<u> </u>	L
8	88218271517013	BRAJINDER KUMAR	<u> </u>	<u> </u>
9	88218271517021	LAKHWINDER SINGH	<u> </u>	L
10	88218271517023	_J MANPREET SINGH	<u> </u>	<u> </u>
11	88218271517025	JMUKESH KUMAR BHATIA	<u> </u>	<u> </u>
12	88218271517027	_J NIKHIL SANGA	<u> </u>	<u> </u>
13	88218271517028	NEERAJ CHOUDHARY	L	L
14	88218271517029	J PANKAJ CHOUDHARY	L	L
15 	88218271517033	PARVINDER KUMAR	L	L
16	88218271517035	_] RAHUL	<u> </u>	<u> </u>
17	88218271517036	RAHUL KUMAR	<u> </u>	<u> </u>
18	88218271517037	RAHUL SAROJ	<u> </u>	<u> </u>
19	88218271517038	RAMAN CHAUDHARY	<u> </u>	<u> </u>
20	88218271517039	JRAMAN KUMAR	 	
21	88218271517040	RAMDEV		

2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 2 of 2 Center Name: 2

2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course: 139 / MECH. REF. & AIR CONDITIONING
Subject: 99913 / ENGINEERING DRAWING

Class: First

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.		
22	88218271517041	RAVI KUMAR				
23	88218271517042	RAKESH KUMAR				
24	88218271517046	SOHIL BARI				
25	88218271517047	SUBHASH CHAND	<u> </u>			
26	88218271517048	SUJAN SINGH	<u> </u>			
27	88218271517050					
28	88218271517052	YOGESH RAJU	I			
	al No. Of Answer Shene and Signature Of		Undertaki ng			
nave	Undertaking I (Name) (Designation) hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also					
hereb	oy undertake that if	any mistakes are found, I will	not be entitled for	any remuneration.		
			· ·	ture of the Invigilator		
I hav fille	ve conducted 20% rand ed correctly as per i	dom checking of the UMR sheet of nstructions.	the said examinati	on and found that particulars have been		
Name	of the Superintender	nt	Si gna	ture of the Superintendent		
l hav fille	ve conducted 10% rand ed correctly as per i	dom checking of the OMR sheet of nstructions.	the said examinati	on and found that particulars have been		
Name	of the Deputy Contro	oller	Si gna	ture of the Deputy Controller		
	ave conducted 5% randed correctly as per i		the said examinati	on and found that particulars have been		
Name	of the Controller		Si gna	ture of the Controller		

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course: 139 / MECH. REF. & AIR CONDITIONING

Class: Second

Subject: 99932 / WORKSHOP CAL. & SCIENCE

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88218271517004	JAKASH KUMAR		
2	88218271517005	JAMIT KUMAR		
3	88218271517008	JARAN KUMAR	<u> </u>	
4	88218271517009	_] ATISH		
5 	88218271517010	JAMANDEEP SINGH	<u> </u>	
6	88218271517011	BALJEET SINGH		
7	88218271517013	BRAJINDER KUMAR	<u> </u>	
8	88218271517017	HARDEEP SINGH	<u> </u>	
9	88218271517018	KHUSHAL SINGH	<u> </u>	
10	88218271517025	JMUKESH KUMAR BHATIA	<u> </u>	
11 	88218271517036	_J RAHUL KUMAR		
12	88218271517037	RAHUL SAROJ		
13	88218271517040	_] RAMDEV		
14	88218271517043	SAGAR		
15	88218271517044	SANDEEP KUMAR		
16	88218271517051	JUNEESH		

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 PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course: 139 / MECH. REF. & AIR CONDITIONING Class: Second

99932 / WORKSHOP CAL. & SCIENCE Subject:

Name and Signature Of Incharge

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

Total No. Of Answer Sheets Packed >

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course: 139 / MECH. REF. & AIR CONDITIONING

Class: Second

Subject: 99933 / ENGINEERING DRAWING

S	.No Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.		
1	88218271517009	ATISH				
2						
3	88218271517033	DADWINDED WILLIAM D				
4	88218271517046	COLIII DADI				
	Total No. Of Students in this Subject > Present: Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaking I (Name) hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also					
	nereby undertake that if	any mistakes are found, l'will i		ure of the Invigilator		
	I have conducted 20% rand filled correctly as per i	dom checking of the OMR sheet of instructions.	the said examination	n and found that particulars have been		
	Name of the Superintender	nt	Si gnati	ure of the Superintendent		
	I have conducted 10% rand filled correctly as per i	dom checking of the OMR sheet of instructions.	the said examination	n and found that particulars have been		
	Name of the Deputy Contro	oller	Si gnati	ure of the Deputy Controller		
	I have conducted 5% rand filled correctly as per i	dom checking of the OMR sheet of instructions.	the said examination	n and found that particulars have been		
	Name of the Controller		Si gnatı	ure of the Controller		

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA Center Name:

Course: 139 / MECH. REF. & AIR CONDITIONING

Class: Second

Subject: 99977 / EMPLOYABILITY SKILLS

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88218271517004	JAKASH KUMAR	<u> </u>	<u> </u>
2	88218271517005	AMIT KUMAR	<u> </u>	L
3	88218271517008	ARAN KUMAR	<u> </u>	L
4	88218271517009	ATISH	<u> </u>	L
5	88218271517010	AMANDEEP SINGH	<u> </u>	L
6	88218271517011	BALJEET SINGH	<u> </u>	L
7	88218271517013	BRAJINDER KUMAR	<u> </u>	L
8	88218271517017	HARDEEP SINGH	<u> </u>	L
9	88218271517018	KHUSHAL SINGH	<u> </u>	L
10	88218271517025	MUKESH KUMAR BHATIA	<u> </u>	L
11	88218271517036	RAHUL KUMAR		L
12	88218271517037	RAHUL SAROJ		L
13	88218271517040	RAMDEV		L
14	88218271517043	SAGAR		L
15	88218271517044	SANDEEP KUMAR		L
16	88218271517051	UNEESH		L

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 PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name : 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course: 139 / MECH. REF. & AIR CONDITIONING Class: Second

Subject: 99977 / EMPLOYABILITY SKILLS

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

Class: Third

PAGE: 1 of 3 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA Center Name:

Course:

139 / MECH. REF. & AIR CONDITIONING

99951 / TRADE THEORY Subject:

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88218271517001 ABHISHEK THAKUR 88218271517002 _| ABHISHEKH VIRDI 3 88218271517003 _| AJAY KUMAR 88218271517004 _| AKASH KUMAR 5 88218271517005 | AMIT KUMAR 88218271517006 | AMIT SINGH 88218271517008 | ARAN KUMAR 88218271517009 | ATISH 88218271517010 | AMANDEEP SINGH 88218271517011 | BALJEET SINGH 10 88218271517012 | BHUPINDER SINGH 12 88218271517013 | BRAJINDER KUMAR 13 88218271517014 | DEEPAK KUMAR 14 88218271517015 | DEEPAK RAI 88218271517016 | GURMEET SINGH 15 88218271517017 | HARDEEP SINGH 16 17 88218271517018 | KHUSHAL SINGH 88218271517019 | LAKHVIR SINGH 18 88218271517020 | LOVEPREET SINGH 20 88218271517021 | LAKHWINDER SINGH 88218271517023 $_{\parallel}$ MANPREET SINGH

3 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course: 139 / MECH. REF. & AIR CONDITIONING

Class: Third

Subject: 99951 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88218271517025	MUKESH KUMAR BHATIA	<u> </u>	<u></u>
23	88218271517027	NIKHIL SANGA	<u> </u>	L
24	88218271517028	NEERAJ CHOUDHARY	<u> </u>	L
25 	88218271517029	PANKAJ CHOUDHARY	<u> </u>	L
26	88218271517032	PARMINDER SINGH	<u> </u>	L
27	88218271517033	PARVINDER KUMAR	<u> </u>	L
28	88218271517034	PUSHPENDER	<u> </u>	L
29	88218271517035	_] RAHUL		L
30 <u> </u>	88218271517036	RAHUL KUMAR		L
31	88218271517037	RAHUL SAROJ		L
32	88218271517038	RAMAN CHAUDHARY		L
33	88218271517039	RAMAN KUMAR		L
34	88218271517040	_] RAMDEV	<u> </u>	L
35	88218271517041	RAVI KUMAR		L
36	88218271517042	RAKESH KUMAR		L
37 	88218271517043	SAGAR		L
38	88218271517044	SANDEEP KUMAR		
39	88218271517046	SOHIL BARI		
40	88218271517047	SUBHASH CHAND		
41	88218271517048	SUJAN SINGH		
42	88218271517050	TONY KUMAR	<u></u>	L

Class: Third

Signature of the Controller

PAGE: 3 of 3 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name:

2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course: 139 / MECH. REF. & AIR CONDITIONING

Subject: 99951 / TRADE THEORY

Name of the Controller

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
43	88218271517051	UNEESH		
44				
Tot		this Subject > Present : Ab	esent:	
			Undertaki ng	
have	appeared under my su	(Designation)_ gilator. I have personally che upervision in today's exam, hav any mistakes are found, I will	e been filled and sh	hereby certify that I have conducted the transport to the particulars of all the students who haded correctly in the OMR sheets. I also any remuneration.
			Si gna	ture of the Invigilator
	ve conducted 20% rand ed correctly as per i		f the said examinati	on and found that particulars have been
Name	of the Superintender	nt	Si gna	ture of the Superintendent
l ha fill	ve conducted 10% rand ed correctly as per i	dom checking of the OMR sheet o nstructions.	f the said examinati	on and found that particulars have been
Name	of the Deputy Contro	oller	Si gna	ture of the Deputy Controller
	ave conducted 5% rand ed correctly as per i		f the said examinati	on and found that particulars have been

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

139 / MECH. REF. & AIR CONDITIONING

Course: Class: Third

99952 / WORKSHOP CAL. & SCIENCE Subject:

PAGE: 1

Center Name:

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88218271517001 | ABHISHEK THAKUR 88218271517002 | ABHISHEKH VIRDI 3 88218271517003 _| AJAY KUMAR 88218271517004 | AKASH KUMAR 5 88218271517005 | AMIT KUMAR 88218271517006 | AMIT SINGH 88218271517008 | ARAN KUMAR 88218271517009 | ATISH 88218271517010 _| AMANDEEP SINGH 88218271517011 | BALJEET SINGH 10 88218271517012 | BHUPINDER SINGH 12 88218271517013 | BRAJINDER KUMAR 13 88218271517014 | DEEPAK KUMAR 14 88218271517015 | DEEPAK RAI 88218271517016 | GURMEET SINGH 15 88218271517017 | HARDEEP SINGH 16 17 88218271517018 | KHUSHAL SINGH 88218271517019 | LAKHVIR SINGH 18 88218271517020 | LOVEPREET SINGH 20 88218271517021 | LAKHWINDER SINGH 88218271517023 $_{\parallel}$ MANPREET SINGH

PAGE: 2 of 3 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

139 / MECH. REF. & AIR CONDITIONING

Course: Class: Third

Subject: 99952 / WORKSHOP CAL. & SCIENCE

Center Name:

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88218271517025	JMUKESH KUMAR BHATIA	<u> </u>	<u> </u>
23	88218271517027	_J NIKHIL SANGA	<u> </u>	L
24	88218271517028	NEERAJ CHOUDHARY	<u></u>	L
25 	88218271517029	J PANKAJ CHOUDHARY	<u></u>	L
26	88218271517032	PARMINDER SINGH	<u></u>	L
27	88218271517033	PARVINDER KUMAR	<u> </u>	L
28	88218271517034	PUSHPENDER	<u> </u>	L
29	88218271517035	_] RAHUL	<u> </u>	L
30 <u> </u>	88218271517036	RAHUL KUMAR	<u> </u>	L
31	88218271517037	RAHUL SAROJ	<u> </u>	L
32	88218271517038	RAMAN CHAUDHARY	<u> </u>	L
33	88218271517039	RAMAN KUMAR		L
34	88218271517040	_] RAMDEV	<u> </u>	L
35 	88218271517041	_J RAVI KUMAR	<u> </u>	L
36 	88218271517042	RAKESH KUMAR	<u> </u>	L
37	88218271517043	SAGAR		L
38	88218271517044	SANDEEP KUMAR		L
39 	88218271517046	SOHIL BARI		L
40	88218271517047	SUBHASH CHAND		<u></u>
41	88218271517048	JSUJAN SINGH		
42	88218271517050	TONY KUMAR		<u> </u>

PAGE: 3 of 3 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name:

2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course :

139 / MECH. REF. & AIR CONDITIONING

Class: Third

99952 / WORKSHOP CAL. & SCIENCE Subject:

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88218271517051 | UNEESH 88218271517052 | YOGESH RAJU 44 Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Controller

PAGE: 1 of 3 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course: 139 / MECH. REF. & AIR CONDITIONING Class: Third

Subject: 99953 / ENGINEERING DRAWING

Center Name:

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88218271517001	ABHISHEK THAKUR	<u> </u>	L
2	88218271517002	ABHISHEKH VIRDI	<u> </u>	L
3	88218271517003	JAJAY KUMAR	<u> </u>	L
4	88218271517004	JAKASH KUMAR	<u> </u>	L
5	88218271517005	JAMIT KUMAR	<u> </u>	L
6	88218271517006	_J AMIT SINGH	<u> </u>	L
7	88218271517008	JARAN KUMAR	<u> </u>	L
8	88218271517009	_] ATISH		L
9	88218271517010	JAMANDEEP SINGH		L
10	88218271517011	BALJEET SINGH		L
11	88218271517012	BHUPINDER SINGH	<u> </u>	L
12	88218271517013	BRAJINDER KUMAR		L
13	88218271517014	DEEPAK KUMAR	<u> </u>	L
14	88218271517015	JDEEPAK RAI	<u> </u>	L
15	88218271517016	GURMEET SINGH	<u> </u>	L
16	88218271517017	HARDEEP SINGH	<u> </u>	L
17 	88218271517018	KHUSHAL SINGH		L
18	88218271517019	LAKHVIR SINGH	<u> </u>	L
19	88218271517020	LOVEPREET SINGH		L
20	88218271517021	LAKHWINDER SINGH		<u></u>
21	88218271517023	MANPREET SINGH	<u> </u>	<u> </u>

3 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

139 / MECH. REF. & AIR CONDITIONING

Course: Class: Third

Subject: 99953 / ENGINEERING DRAWING

Center Name:

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88218271517025	MUKESH KUMAR BHATIA	<u> </u>	
23	88218271517027	NIKHIL SANGA	<u> </u>	L
24	88218271517028	NEERAJ CHOUDHARY	<u> </u>	L
25 	88218271517029	PANKAJ CHOUDHARY	<u> </u>	L
26	88218271517032	PARMINDER SINGH	<u></u>	L
27	88218271517033	PARVINDER KUMAR	<u></u>	L
28	88218271517034	PUSHPENDER	<u></u>	L
29	88218271517035	_J RAHUL	<u> </u>	L
30	88218271517036	RAHUL KUMAR	<u> </u>	L
31	88218271517037	RAHUL SAROJ	<u> </u>	L
32	88218271517038	RAMAN CHAUDHARY	<u> </u>	L
33	88218271517039	RAMAN KUMAR	<u> </u>	L
34	88218271517040	RAMDEV	<u> </u>	L
35 	88218271517041	RAVI KUMAR	<u> </u>	L
36	88218271517042	RAKESH KUMAR	<u> </u>	L
37	88218271517043	SAGAR	<u> </u>	L
38	88218271517044	SANDEEP KUMAR	<u> </u>	L
39	88218271517046	SOHIL BARI	<u> </u>	L
40	88218271517047	SUBHASH CHAND	<u> </u>	L
41	88218271517048	SUJAN SINGH	<u> </u>	
42	88218271517050	JTONY KUMAR	<u> </u>	L

PAGE: 3 of 3 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

139 / MECH. REF. & AIR CONDITIONING

Course: Class: Third

Subject: 99953 / ENGINEERING DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.		
43	88218271517051	JUNEESH				
	88218271517052					
To	otal No. Of Students ir otal No. Of Answer Sh ame and Signature Of	eets Packed >	sent:			
			Undertaki ng			
hav	I (Name) hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.					
			Si gna	ture of the Invigilator		
l h fil	nave conducted 20% ran led correctly as per	dom checking of the OMR sheet o instructions.	f the said examinati	on and found that particulars have been		
Nam	ne of the Superintende	nt	Si gna	ture of the Superintendent		
l h fil	nave conducted 10% ran led correctly as per	dom checking of the OMR sheet o instructions.	f the said examinati	on and found that particulars have been		
Nam	ne of the Deputy Contr	oller	Si gna	ture of the Deputy Controller		
l fil	have conducted 5% ran led correctly as per	dom checking of the OMR sheet o	f the said examinati	on and found that particulars have been		

Class: Third

3 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course: 139 / MECH. REF. & AIR CONDITIONING

Subject: 99955 / TRADE PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88218271517001	JABHISHEK THAKUR	<u> </u>	<u> </u>
2	88218271517002	_J ABHISHEKH VIRDI	<u> </u>	L
3	88218271517003	JAJAY KUMAR	<u> </u>	L
4	88218271517004	JAKASH KUMAR	<u> </u>	L
5 	88218271517005	JAMIT KUMAR	<u> </u>	L
6	88218271517006	JAMIT SINGH	<u> </u>	L
7	88218271517008	JARAN KUMAR	<u> </u>	L
8	88218271517009	_J ATISH	<u> </u>	L
9	88218271517010	JAMANDEEP SINGH	<u> </u>	L
10	88218271517011	BALJEET SINGH	<u> </u>	L
11	88218271517012	BHUPINDER SINGH	<u> </u>	L
12	88218271517013	BRAJINDER KUMAR	<u> </u>	L
13	88218271517014	DEEPAK KUMAR	<u></u>	L
14	88218271517015	DEEPAK RAI	<u></u>	L
15	88218271517016	JGURMEET SINGH	<u></u>	L
16	88218271517017	HARDEEP SINGH	<u> </u>	L
17 	88218271517018	KHUSHAL SINGH	<u> </u>	L
18	88218271517019	LAKHVIR SINGH	<u> </u>	<u> </u>
19	88218271517020	LOVEPREET SINGH	<u> </u>	<u> </u>
20	88218271517021	LAKHWINDER SINGH	L	<u></u>
21	88218271517023	MANPREET SINGH	<u> </u>	<u> </u>
	 .			

Class: Third

3 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course: 139 / MECH. REF. & AIR CONDITIONING

Subject: 99955 / TRADE PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88218271517025	MUKESH KUMAR BHATIA	<u> </u>	
23	88218271517027	NIKHIL SANGA	<u> </u>	L
24	88218271517028	NEERAJ CHOUDHARY	<u> </u>	L
25 	88218271517029	PANKAJ CHOUDHARY	<u> </u>	L
26	88218271517032	PARMINDER SINGH	<u></u>	L
27	88218271517033	PARVINDER KUMAR	<u></u>	L
28	88218271517034	PUSHPENDER	<u></u>	L
29	88218271517035	_J RAHUL	<u> </u>	L
30	88218271517036	RAHUL KUMAR	<u> </u>	L
31	88218271517037	RAHUL SAROJ	<u> </u>	L
32	88218271517038	RAMAN CHAUDHARY	<u> </u>	L
33	88218271517039	RAMAN KUMAR	<u> </u>	L
34	88218271517040	RAMDEV	<u> </u>	L
35 	88218271517041	RAVI KUMAR	<u> </u>	L
36	88218271517042	RAKESH KUMAR	<u> </u>	L
37	88218271517043	SAGAR	<u> </u>	L
38	88218271517044	SANDEEP KUMAR	<u> </u>	L
39	88218271517046	SOHIL BARI	<u> </u>	L
40	88218271517047	SUBHASH CHAND	<u> </u>	L
41	88218271517048	SUJAN SINGH	<u> </u>	
42	88218271517050	JTONY KUMAR	<u> </u>	L

PAGE: 3 of 3 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course :

139 / MECH. REF. & AIR CONDITIONING Class: Third

99955 / TRADE PRACTICAL Subject:

Name Of the Student | Answer Sheet No. S.No Student's Sign. Regd. No. 88218271517051 | UNEESH 88218271517052 | YOGESH RAJU 44 Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course: 175 / CUTTING SEW. & EMB. TEACHER'S TRAINING

Class: First

Subject: 17511 / PRINCIPLE OF EDUCATION

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88175176016009	MANPREET KAUR	<u> </u>	L
2	88175176017001	JAKWINDER KAUR	<u> </u>	L
3	88175176017005	BALVIR KAUR	L	L
4	88175176017006	JBHAWANA SHARMA	L	L
5	88175176017007	JHARJIT KAUR	L	L
6	88175176017009	JATINDER KAUR	L	L
7	88175176017018	JMONIA RANI	L	L
8	88175176017020	NAVJOT KAUR	L	L
9	88175176017021	JPARAMJIT KAUR	L	L
10	88175176017022	J PRIYANKA	L	L
11 	88175176017023	JPRIYANKA DEVI	L	L
12	88175176017024	PRIYANKA KUMARI	L	L
13	88175176017026	RAMANDIP KAUR	L	L
14	88175176017027	RAMANPREET KAUR	L	L
15	88175176017029	RAVINDERJIT KAUR	L	L
16 	88175176017030	JRENU KUMARI	L	L
17 	88175176017035	SARBJEET KAUR	L	L
18	88175176017036	SHIVANI	<u> </u>	L
19	88175176017037	SURJIT KAUR	<u> </u>	
20	88175176017038	_J TAMANNA DADWAL	<u> </u>	L

PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA Course: 175 / CUTTING SEW. & EMB. TEACHER'S TRAINING Class: First 17511 / PRINCIPLE OF EDUCATION Subject: Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

Name of the Deputy Controller

filled correctly as per instructions.

Signature of the Deputy Controller

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

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS - SCVT

Center Name: 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course: 175 / CUTTING SEW. & EMB. TEACHER'S TRAINING Class: First

Subject: 17512 / TRADE THEORY

PAGE: 1 of

S.No | Regd. No. | Name Of the Student | Answer Sheet No. | Student's Sign.

1 88175176017023 PRIYANKA DEVI 2 88175176017038 TAMANNA DADWAL

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course: 192 / CONSUMER ELECTRONICS Class: First

Subject: 99912 / WORKSHOP CAL. & SCIENCE

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88273271517076	JANUJ KUMAR		
2	88273271517077	ASHNI KUMAR		
3	88273271517081	JOGINDER SINGH	<u> </u>	
4	88273271517084	_J NEERAJ SINGH	<u> </u>	L
5	88273271517085	PRANSHU SHARMA	<u> </u>	<u> </u>
6	88273271517086	PRINCE CHOUDHARY	<u> </u>	<u> </u>
7	88273271517087	RAHUL	<u> </u>	L
8	88273271517090	SANDEEP KUMAR	<u> </u>	L
9	88273271517091	SANDEEP KUMAR	L	L
10	88273271517094	SHAM		

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

Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA Center Name:

Course: 192 / CONSUMER ELECTRONICS Class: First

Subject: 99912 / WORKSHOP CAL. & SCIENCE

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course: 192 / CONSUMER ELECTRONICS Class: First

Subject: 99913 / ENGINEERING DRAWING

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88273271517076	JANUJ KUMAR		
2	88273271517077	ASHNI KUMAR		
3	88273271517081	JOGINDER SINGH	<u> </u>	
4	88273271517084	_J NEERAJ SINGH	<u> </u>	L
5	88273271517085	PRANSHU SHARMA	<u> </u>	<u> </u>
6	88273271517086	PRINCE CHOUDHARY	<u> </u>	<u> </u>
7	88273271517087	RAHUL	<u> </u>	L
8	88273271517090	SANDEEP KUMAR	<u> </u>	L
9	88273271517091	SANDEEP KUMAR	L	L
10	88273271517094	SHAM		

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 PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course: 192 / CONSUMER ELECTRONICS Class: First

Subject: 99913 / ENGINEERING DRAWING

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 1 of 1 Center Name:

2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course: 192 / CONSUMER ELECTRONICS

Class: Second

Subject: 99932 / WORKSHOP CAL. & SCIENCE

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88273271517076	ANUJ KUMAR		
2	88273271517081	JOGINDER SINGH	<u></u>	
3	88273271517085	PRANSHU SHARMA	<u></u>	
4	88273271517086	PRINCE CHOUDHARY	<u></u>	
5	88273271517087	RAHUL	<u></u>	<u> </u>
6	88273271517094	SHAM		I
	me and Signature Of ame) e exami nati on as Invi appeared under my su	G	Undertaking ———————————————————————————————————	nereby certify that I have conducted the t particulars of all the students who aded correctly in the OMR sheets. I also any remuneration.
here	by undertake that if	any mistakes are found, I will		
l ha fill	ve conducted 20% rand ed correctly as per i	om checking of the OMR sheet of nstructions.	g .	ture of the Invigilator on and found that particulars have been
Name	of the Superintenden	t	Si gna	ture of the Superintendent
I ha fill	ve conducted 10% rand ed correctly as per i	om checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been
Name	of the Deputy Contro	ller	Si gna	ture of the Deputy Controller
l h fill	ave conducted 5% rand ed correctly as per i	om checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been
Name	of the Controller		Si gna	ture of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 1 of 1 Center Name: 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course: 192 / CONSUMER ELECTRONICS Class: Second

Subject: 99933 / ENGINEERING DRAWING

Name of the Controller

S.No	o Regd. No. 	Name Of the Student	Answer Sheet No.	Student's Sign. 			
1	88273271517081	JOGINDER SINGH	<u> </u>	<u> </u>			
2	88273271517086	PRINCE CHOUDHARY	<u> </u>	L			
3	88273271517087	_] RAHUL	<u> </u>	<u> </u>			
4	88273271517094	SHAM	<u> </u>	<u> </u>			
٦	Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge						
l al ha	(Name)oove examination as Invave appeared under my s	(Designation) igilator. I have personally chec upervision in today's exam, have	Undertakingh ked and ensured that been filled and sha	ereby certify that I have conducted the particulars of all the students who ded correctly in the OMR sheets. I also			
he	ereby undertake that if	any mistakes are found, I will	not be entitled for	any remuneration. ure of the Invigilator			
l fi	have conducted 20% ran	dom checking of the OMR sheet of instructions.	S .	n and found that particulars have been			
Na	ame of the Superintende	nt	Si gnat	ure of the Superintendent			
l fi	have conducted 10% ran illed correctly as per	dom checking of the OMR sheet of instructions.	the said examinatio	n and found that particulars have been			
Na	ame of the Deputy Contr	oller	Si gnat	ure of the Deputy Controller			
l fi	l have conducted 5% ran illed correctly as per	dom checking of the OMR sheet of instructions.	the said examinatio	n and found that particulars have been			

Class: Second

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 1 Center Name:

Subject:

2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course: 192 / CONSUMER ELECTRONICS

99977 / EMPLOYABILITY SKILLS

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88273271517076 | ANUJ KUMAR 88273271517081 JOGINDER SINGH 2 3 88273271517085 _I PRANSHU SHARMA 88273271517086 _I PRINCE CHOUDHARY 88273271517087 | RAHUL 5 88273271517094 _I SHAM Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)_____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Controller Signature of the Controller

Answer Sheet No.

Student's Sign.

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA Center Name:

Course: 192 / CONSUMER ELECTRONICS

Class: Third

Name Of the Student

Subject: 99951 / TRADE THEORY

Regd. No.

PAGE: 1

S.No

		'	, ,	
1	88273271516094	SANDEEP SINGH		
2	88273271517074	AMIT PAL		L
3	88273271517076	ANUJ KUMAR	<u> </u>	L
4	88273271517077	ASHNI KUMAR	<u> </u>	L
5	88273271517081	JOGINDER SINGH	<u> </u>	L
6	88273271517083	MANJIT SINGH	<u> </u>	L
7	88273271517084	NEERAJ SINGH	<u> </u>	L
8	88273271517085	PRANSHU SHARMA	<u> </u>	L
9	88273271517086	PRINCE CHOUDHARY	<u> </u>	L
10	88273271517087	RAHUL	<u> </u>	L
11	88273271517088	RAHUL KUMAR	<u> </u>	L
12	88273271517090	SANDEEP KUMAR	<u> </u>	L
13	88273271517091	SANDEEP KUMAR	<u> </u>	L
14	88273271517093	SATNAM SINGH	<u> </u>	<u></u>
15	88273271517094	SHAM	<u> </u>	L

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course: 192 / CONSUMER ELECTRONICS Class: Third

Subject: 99951 / TRADE THEORY

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course: 192 / CONSUMER ELECTRONICS

Class: Third

Subject: 99952 / WORKSHOP CAL. & SCIENCE

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88273271517074	JAMIT PAL	<u> </u>	<u></u>
2	88273271517076	JANUJ KUMAR	<u> </u>	L
3	88273271517077	JASHNI KUMAR	<u> </u>	L
4	88273271517081	JOGINDER SINGH	L	L
5 	88273271517083	_J MANJIT SINGH	<u> </u>	L
6	88273271517084	NEERAJ SINGH	<u> </u>	L
7	88273271517085	PRANSHU SHARMA	<u> </u>	L
8	88273271517086	PRINCE CHOUDHARY	L	L
9	88273271517087	_] RAHUL	<u> </u>	L
10	88273271517088	RAHUL KUMAR	L	L
11	88273271517090	SANDEEP KUMAR	L	L
12	88273271517091	SANDEEP KUMAR		
13	88273271517093	SATNAM SINGH		
14	88273271517094	SHAM	<u></u>	

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

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA Center Name:

Course: 192 / CONSUMER ELECTRONICS Class: Third

Subject: 99952 / WORKSHOP CAL. & SCIENCE

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course: 192 / CONSUMER ELECTRONICS

Class: Third

Name Of the Student

Subject: 99953 / ENGINEERING DRAWING

Regd. No.

PAGE: 1

S.No

1	88273271517074	AMIT PAL	<u> </u>	L
2	88273271517076	ANUJ KUMAR	<u> </u>	
3	88273271517077	ASHNI KUMAR		
4	88273271517081	JOGINDER SINGH		
5	88273271517083	MANJIT SINGH		
6	88273271517084	NEERAJ SINGH		
7	88273271517085	PRANSHU SHARMA		
8	88273271517086	PRINCE CHOUDHARY		
9	88273271517087	RAHUL		
10	88273271517088	RAHUL KUMAR		
11	88273271517090	SANDEEP KUMAR		
12	88273271517091	SANDEEP KUMAR		
13	88273271517093	SATNAM SINGH		
14	88273271517094	SHAM		

Answer Sheet No.

Student's Sign.

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

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA Center Name:

Course: 192 / CONSUMER ELECTRONICS Class: Third

Subject: 99953 / ENGINEERING DRAWING

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course: 192 / CONSUMER ELECTRONICS

Class: Third

Name Of the Student

Subject: 99955 / TRADE PRACTICAL

Regd. No.

PAGE: 1

S.No

			· 	
1	88273271517074	AMIT PAL	<u></u>	
2	88273271517076	ANUJ KUMAR	<u> </u>	
3	88273271517077	ASHNI KUMAR	<u> </u>	L
4	88273271517081	JOGINDER SINGH	<u> </u>	<u></u>
5	88273271517083	MANJIT SINGH		L
6	88273271517084	NEERAJ SINGH		
7	88273271517085	PRANSHU SHARMA		
8	88273271517086	PRINCE CHOUDHARY		L
9	88273271517087	RAHUL		
10	88273271517088	RAHUL KUMAR		
11	88273271517090	SANDEEP KUMAR		
12	88273271517091	SANDEEP KUMAR		
13	88273271517093	SATNAM SINGH		
14	88273271517094	SHAM		

Answer Sheet No.

Student's Sign.

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

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING
PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT
Center Name: 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA
Course: 192 / CONSUMER ELECTRONICS Class: Third
Subject: 99955 / TRADE PRACTICAL

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course: 192 / CONSUMER ELECTRONICS Class: Fourth

Subject: 99971 / TRADE THEORY

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88273271516072	JAKSHAY KUMAR		
2	88273271516077	GAGANDEEP SINGH		L
3	88273271516080	MANISH KUMAR		L
4	88273271516082	PALWINDER SINGH		L
5 _L	88273271516089	RAVI KUMAR		L
6	88273271516091	ROHIT THAKUR		<u> </u>
7	88273271516092	SAHIL		L
8	88273271516093	SANDEEP KUMAR		
9	88273271516094	SANDEEP SINGH		
10	88273271516096	SUNDIP KUMAR RANA	<u></u>	L

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
PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course: 192 / CONSUMER ELECTRONICS Class: Fourth

Subject: 99971 / TRADE THEORY

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA Course : 192 / CONSUMER ELECTRONICS Class: Fourth 99973 / ENGINEERING DRAWING Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88273271516080 | MANISH KUMAR Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course: 370 / ART & CRAFTS Class: First

Subject: 17070 / PRINCIPLES OF EDUCATION

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88370176017039 | AKASHDEEP SINGH 88370176017055 _| RISHA KUMARI Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course: 370 / ART & CRAFTS Class: First

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

5.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
 	88370176017055	RISHA KUMARI		
<u>)</u>	88370176017057	SAPNA		
3		CATICLLIZIMAAD		
To	otal No. Of Students in otal No. Of Answer She ame and Signature Of		ent:	
			Undertaki ng	
abo hav	/e appeared under my su	gilator. I have personally check	ked and ensured that been filled and shad	ereby certify that I have conducted the particulars of all the students who ded correctly in the OMR sheets. I also any remuneration.
			Si gnati	ure of the Invigilator
l h fil	nave conducted 20% rand led correctly as per i	lom checking of the OMR sheet of nstructions.	the said examination	n and found that particulars have been
Nan	ne of the Superintenden	t	Si gnati	ure of the Superintendent
l h fil	nave conducted 10% rand led correctly as per i	lom checking of the OMR sheet of nstructions.	the said examination	n and found that particulars have been
Nan	ne of the Deputy Contro	ller	Si gnati	ure of the Deputy Controller
l fil	have conducted 5% rand led correctly as per i	lom checking of the OMR sheet of nstructions.	the said examination	n and found that particulars have been
Nan	ne of the Controller		Si gnati	ure of the Controller

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

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	88370176017039	AKASHDEEP SINGH	<u> </u>	L
2	88370176017040	AMANDEEP KAUR	<u> </u>	<u> </u>
3	88370176017041	AARTI DEVI	L	L
4	88370176017042	BALJIT KAUR	<u> </u>	<u> </u>
5	88370176017043	DIVYA BABBAR	<u> </u>	<u> </u>
6	88370176017046	KAMNA THAKUR	<u> </u>	<u> </u>
7	88370176017047	MANDEEP LAL	<u> </u>	<u> </u>
8	88370176017048	MEENA KUMARI	<u> </u>	L
9	88370176017049	NARINDER KAUR	<u> </u>	L
10	88370176017050	NARINDER KUMAR	<u> </u>	<u> </u>
11 	88370176017051	NINDIKA KUMARI	<u> </u>	<u> </u>
12	88370176017053	PAYAL	<u> </u>	<u> </u>
13	88370176017054	PRIYA	<u> </u>	L
14	88370176017055	RISHA KUMARI	<u> </u>	L
15 	88370176017056	SANJAL SADYAL	<u> </u>	L
16	88370176017057	SAPNA	<u> </u>	L
17	88370176017058	SATISH KUMAR	<u></u>	
18	88370176017061	TAJINDER KAUR		
19	88370176017062	VIJAY LAKSHMI		

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA Center Name: Course: 370 / ART & CRAFTS 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 Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent

Name of the Deputy Controller

filled correctly as per instructions.

Signature of the Deputy Controller

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

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been

Name of the Controller

2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2432 / INDUSTRIAL TRAINING INSTITUTE (W) , URMUR TANDA

Course: 111 / WELDER(GAS AND ELECTRIC) Class: Second

Subject: 99931 / TRADE THEORY

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88212171617002	JAMANDEEP SINGH		
2	88212171617007	BALJIT SINGH		L
3	88212171617013	GURSHARN SINGH SAINI		L
4	88212171617020	JASWINDER SINGH	<u> </u>	L
5	88212171617021	_] KHUSHWINDER	<u> </u>	L
6	88212171617023	LOVEPREET SINGH	<u> </u>	L
7	88212171617025	LOVEPREET SINGH	<u> </u>	L
8	88212171617026	LOVEPREET SINGH	<u> </u>	L
9	88212171617029	MANPREET SINGH	<u> </u>	L
10	88212171617030	PARVINDER SINGH	<u> </u>	L

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

Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2432 / INDUSTRIAL TRAINING INSTITUTE (W), URMUR TANDA Course: 111 / WELDER (GAS AND ELECTRIC) Class: Second Subject: 99931 / TRADE THEORY Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent

Name of the Deputy Controller

filled correctly as per instructions.

Signature of the Deputy Controller

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

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been

Name of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2432 / INDUSTRIAL TRAINING INSTITUTE(W), URMUR TANDA

111 / WELDER(GAS AND ELECTRIC)

Course: Class: Second

Subject: 99933 / ENGINEERING DRAWING

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88212171617002	JAMANDEEP SINGH		<u> </u>
2	88212171617007	BALJIT SINGH		<u> </u>
3	88212171617013	GURSHARN SINGH SAINI		<u> </u>
4	88212171617018	HASANDEEP SINGH		<u> </u>
5	88212171617020	JASWINDER SINGH		<u> </u>
6	88212171617021	KHUSHWINDER		<u> </u>
7	88212171617023	LOVEPREET SINGH	<u></u>	L
8	88212171617025	LOVEPREET SINGH	<u></u>	L
9	88212171617026	LOVEPREET SINGH	<u></u>	L
10	88212171617029	JMANPREET SINGH	<u></u>	L
11	88212171617030	PARVINDER SINGH		<u> </u>
12	88212171617031	PUSHMINDER SINGH	<u></u>	L
13	88212171617039	JYATEEN MANHAS	<u> </u>	L

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

Total No. Of Answer Sheets Packed > Name and Signature Of Incharge

PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2432 / INDUSTRIAL TRAINING INSTITUTE (W), URMUR TANDA Course: 111 / WELDER (GAS AND ELECTRIC) Class: Second Subject: 99933 / ENGINEERING DRAWING Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

Name of the Deputy Controller

filled correctly as per instructions.

Signature of the Deputy Controller

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

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2432 / INDUSTRIAL TRAINING INSTITUTE (W), URMUR TANDA Course : 114 / PLUMBER Class: Second 99931 / TRADE THEORY Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88209171617043 | AMANPREET SINGH 88209171617046 | AMARJIT SINGH 88209171617049 | CHARANJIT SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator

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

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

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been

Signature of the Superintendent

Signature of the Deputy Controller

Signature of the Controller

No. Of Students On This Page >> Present>> Absent >> Name Of Invigilator Signature Of Invigilator

3

Name of the Superintendent

Name of the Deputy Controller

Name of the Controller

filled correctly as per instructions.

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2432 / INDUSTRIAL TRAINING INSTITUTE (W) , URMUR TANDA

Course: 114 / PLUMBER Class: Second

Subject: 99933 / ENGINEERING DRAWING

S.	.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1		88209171616065	RUPINDER SINGH		
2		88209171617054	GAGANDEEP SINGH		
3		88209171617056	GURINDER PAL SINGH		
4		88209171617076	RESHAM SINGH		
5		88209171617091	YASHPAL SINGH		
	Tot	al No. Of Answer She me and Signature Of	Incharge	Undertaki ng	
			Incharge	Undortaki na	
	have	appeared under my su	(Designation)_ gilator. I have personally check pervision in today's exam, have any mistakes are found, I will r	ked and ensured that been filled and shad	ereby certify that I have conducted the particulars of all the students who ded correctly in the OMR sheets. I also any remuneration.
				Si gnatu	ure of the Invigilator
	l ha fill	ve conducted 20% rand ed correctly as per i	om checking of the OMR sheet of nstructions.	the said examination	n and found that particulars have been
	Name	of the Superintenden	t	Si gnatu	ure of the Superintendent
	l ha fill	ve conducted 10% rand ed correctly as per i	om checking of the OMR sheet of nstructions.	the said examination	n and found that particulars have been
	Name	of the Deputy Contro	ller	Si gnatu	ure of the Deputy Controller
	l h fill	ave conducted 5% rand ed correctly as per i	om checking of the OMR sheet of nstructions.	the said examination	n and found that particulars have been
	Name	of the Controller		Signati	ire of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2432 / INDUSTRIAL TRAINING INSTITUTE (W), URMUR TANDA

Course: 132 / ELECTRICIAN Class: Second

Subject: 99931 / TRADE THEORY

S.No Regd. No. Name Of the Student Student's Sign. Answer Sheet No. 88231271617105 | MANPREET SINGH 2 3 88231271617107 | RAHUL KUMAR 88231271617108 | SUKHDEV SINGH 5 88231271617112 _{I RAJU} Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng hereby certify that I have conducted the (Designation) above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Controller Signature of the Controller

Answer Sheet No.

Student's Sign.

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2432 / INDUSTRIAL TRAINING INSTITUTE(W), URMUR TANDA

Course: 132 / ELECTRICIAN Class: Second

Subject: 99933 / ENGINEERING DRAWING

PAGE: 1

S.No

Name Of the Student

Regd. No.

3.1 1 0			Allswei Sheet No.	
1	88231271617092	_J AKASH	<u> </u>	
2	88231271617093	AMANDEEP SINGH	<u> </u>	L
3	88231271617094	AMANVIR SINGH	<u> </u>	L
4	88231271617095	AMANPREET SINGH	<u></u>	<u></u>
5	88231271617096	ANKIT KUMAR	<u> </u>	<u> </u>
6	88231271617097	DEEPAK KUMAR	<u> </u>	<u> </u>
7	88231271617099	HARJIT SINGH	<u> </u>	<u> </u>
8	88231271617102	JATINPREET SINGH	<u> </u>	<u> </u>
9	88231271617103	JAGDEEP SINGH	<u> </u>	<u> </u>
10	88231271617104	JASWINDER SINGH	<u> </u>	<u> </u>
11	88231271617105	MANPREET SINGH	<u> </u>	<u> </u>
12	88231271617107	RAHUL KUMAR	<u> </u>	<u> </u>
13	88231271617108	SUKHDEV SINGH	<u> </u>	L
14	88231271617109	SURJIT KUMAR	<u> </u>	
15 	88231271617111	CHANPREET SINGH	<u> </u>	
16	88231271617112	RAJU	 	

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 PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2432 / INDUSTRIAL TRAINING INSTITUTE (W), URMUR TANDA Center Name: Course: 132 / ELECTRICIAN Class: Second 99933 / ENGINEERING DRAWING Subject: Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent

Name of the Deputy Controller

filled correctly as per instructions.

Signature of the Deputy Controller

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

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been

Name of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2432 / INDUSTRIAL TRAINING INSTITUTE (W) , URMUR TANDA

Course: 132 / ELECTRICIAN Class: Third

Subject: 99951 / TRADE THEORY

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231271617092	_J AKASH	<u> </u>	<u></u>
2	88231271617093	JAMANDEEP SINGH	L	L
3	88231271617094	AMANVIR SINGH	<u> </u>	L
4	88231271617095	AMANPREET SINGH	<u> </u>	L
5	88231271617096	JANKIT KUMAR	<u> </u>	L
6	88231271617097	DEEPAK KUMAR	<u> </u>	L
7	88231271617099	HARJIT SINGH	<u> </u>	L
8	88231271617102	JATINPREET SINGH	<u> </u>	L
9	88231271617103	JAGDEEP SINGH	<u> </u>	L
10	88231271617104	JASWINDER SINGH	<u> </u>	L
11	88231271617105	 MANPREET SINGH	<u> </u>	L
12	88231271617107	RAHUL KUMAR		<u> </u>
13	88231271617108	SUKHDEV SINGH		
14	88231271617109	SURJIT KUMAR		
15	88231271617111	CHANPREET SINGH		
16	88231271617112	RAJU		

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

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2432 / INDUSTRIAL TRAINING INSTITUTE (W), URMUR TANDA Center Name: Course: 132 / ELECTRICIAN Class: Third 99951 / TRADE THEORY Subject: Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2432 / INDUSTRIAL TRAINING INSTITUTE (W) , URMUR TANDA

Course: 132 / ELECTRICIAN Class: Third

99952 / WORKSHOP CAL. & SCIENCE Subject:

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231271617092	AKASH	<u> </u>	
2	88231271617093	AMANDEEP SINGH	<u> </u>	
3	88231271617094	AMANVIR SINGH	<u> </u>	
4	88231271617095	AMANPREET SINGH	<u> </u>	
5	88231271617096	ANKIT KUMAR	<u> </u>	
6	88231271617097	DEEPAK KUMAR	<u> </u>	
7	88231271617099	HARJIT SINGH	<u> </u>	
8	88231271617102	JATINPREET SINGH	<u> </u>	
9	88231271617103	JAGDEEP SINGH	<u> </u>	
10	88231271617104	JASWINDER SINGH	<u> </u>	
11	88231271617105	MANPREET SINGH	<u> </u>	
12	88231271617107	RAHUL KUMAR	<u> </u>	
13	88231271617108	SUKHDEV SINGH	<u> </u>	
14	88231271617109	SURJIT KUMAR	<u> </u>	
15	88231271617111	CHANPREET SINGH	<u> </u>	
16	88231271617112	_J RAJU	<u></u>	
			·	

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

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2432 / INDUSTRIAL TRAINING INSTITUTE (W), URMUR TANDA Center Name: Course: 132 / ELECTRICIAN Class: Third 99952 / WORKSHOP CAL. & SCIENCE Subject: Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) ____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2432 / INDUSTRIAL TRAINING INSTITUTE (W) , URMUR TANDA

Course: 132 / ELECTRICIAN Class: Third

Subject: 99953 / ENGINEERING DRAWING

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231271617092	JAKASH	<u> </u>	<u> </u>
2	88231271617093	JAMANDEEP SINGH	<u> </u>	L
3	88231271617094	JAMANVIR SINGH	<u> </u>	L
4	88231271617095	JAMANPREET SINGH	<u> </u>	L
5	88231271617096	JANKIT KUMAR	<u> </u>	L
6	88231271617097	DEEPAK KUMAR	<u> </u>	L
7	88231271617099	_J HARJIT SINGH	<u> </u>	L
8	88231271617102	JATINPREET SINGH	<u> </u>	L
9	88231271617103	JAGDEEP SINGH	<u> </u>	L
10	88231271617104	JASWINDER SINGH	<u> </u>	L
11	88231271617105	MANPREET SINGH	<u> </u>	L
12	88231271617107	RAHUL KUMAR	<u> </u>	L
13	88231271617108	SUKHDEV SINGH	<u> </u>	L
14	88231271617109	SURJIT KUMAR	<u> </u>	L
15	88231271617111	CHANPREET SINGH		L
16	88231271617112	RAJU		L

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 PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2432 / INDUSTRIAL TRAINING INSTITUTE (W), URMUR TANDA Center Name: Course: 132 / ELECTRICIAN Class: Third 99953 / ENGINEERING DRAWING Subject: Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

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

Name of the Superintendent Signature of the Superintendent

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

Name of the Deputy Controller Signature of the Deputy Controller

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

Name of the Controller Signature of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2432 / INDUSTRIAL TRAINING INSTITUTE (W) , URMUR TANDA

Course: 132 / ELECTRICIAN Class: Third

Subject: 99955 / TRADE PRACTICAL

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231271617092	AKASH	<u> </u>	<u></u>
2	88231271617093	AMANDEEP SINGH	<u> </u>	L
3	88231271617094	AMANVIR SINGH	<u> </u>	L
4	88231271617095	AMANPREET SINGH	<u> </u>	L
5	88231271617096	ANKIT KUMAR	<u> </u>	L
6	88231271617097	DEEPAK KUMAR	<u> </u>	L
7	88231271617099	HARJIT SINGH	<u> </u>	L
8	88231271617102	JATINPREET SINGH	<u> </u>	L
9	88231271617103	JAGDEEP SINGH	<u> </u>	L
10	88231271617104	JASWINDER SINGH	<u> </u>	L
11	88231271617105	MANPREET SINGH	<u> </u>	L
12	88231271617107	RAHUL KUMAR	<u> </u>	L
13	88231271617108	SUKHDEV SINGH	<u> </u>	L
14	88231271617109	SURJIT KUMAR	<u> </u>	L
15	88231271617111	CHANPREET SINGH	<u> </u>	L
16	88231271617112	RAJU	<u> </u>	

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 PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2432 / INDUSTRIAL TRAINING INSTITUTE (W), URMUR TANDA Center Name: Course: 132 / ELECTRICIAN Class: Third 99955 / TRADE PRACTICAL Subject: Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent

Name of the Deputy Controller

filled correctly as per instructions.

Signature of the Deputy Controller

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

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been

Name of the Controller

Center Name: 2432 / INDUSTRIAL TRAINING INSTITUTE (W), URMUR TANDA Course : 132 / ELECTRICIAN Class: Fourth 99971 / TRADE THEORY Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88231271616081 | INDERJIT SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

filled correctly as per instructions.

Name of the Controller

PAGE: 1 of

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2432 / INDUSTRIAL TRAINING INSTITUTE (W) , URMUR TANDA

Course: 132 / ELECTRICIAN Class: Fourth

Subject: 99973 / ENGINEERING DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231271616077	BIMALJEET SINGH		
2	88231271616079	HARWINDER SINGH		
3	88231271616081	INDERJIT SINGH		
4	88231271616082	JAGJOT SINGH		
5 	88231271616085	MANINDER SINGH		
6	88231271616090	RAVINDER SINGH		
7	88231271616093	SUNIL		
	al No. Of Answer Shome and Signature Of			
			Undertaki ng	
abòv have	appeared under my su	(Designation) gilator. I have personally che upervision in today's exam, hav any mistakes are found, I will	cked and ensured tha e been filled and sh	hereby certify that I have conducted the at particulars of all the students who haded correctly in the OMR sheets. I also any remuneration.
			Si gna	ature of the Invigilator
l ha fill	ve conducted 20% rand ed correctly as per i	dom checking of the OMR sheet o nstructions.	f the said examinati	on and found that particulars have been
Name	of the Superintender	nt	Si gna	ature of the Superintendent
	ve conducted 10% rand ed correctly as per i		f the said examinati	on and found that particulars have been
Name	of the Deputy Contro	ol I er	Si gna	ature of the Deputy Controller
	ave conducted 5% rand ed correctly as per i		f the said examinati	on and found that particulars have been
Name	of the Controller		Si gna	ature of the Controller

1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2432 / INDUSTRIAL TRAINING INSTITUTE (W), URMUR TANDA

Course: 145 / ELECTRONICS MECHANIC Class: Second

Subject: 99933 / ENGINEERING DRAWING

PAGE: 1

S.No Regd. No. Name Of the Student Student's Sign. Answer Sheet No. 88219271617116 | ANKUSH 88219271617117 | BALWINDER SINGH 3 5 88219271617126 | INDERJIT SINGH 88219271617134 | SHARANJIT SINGH 88219271617135 | VIJAY KUMAR 88219271617136 | VIJAYDEEP SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Signature of the Controller

Name of the Controller

2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2432 / INDUSTRIAL TRAINING INSTITUTE (W) , URMUR TANDA

Course: 145 / ELECTRONICS MECHANIC Class: Third

Subject: 99951 / TRADE THEORY

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88219271617114	ABINASH		L
2	88219271617115	AMARJIT SINGH	<u> </u>	<u> </u>
3	88219271617116	ANKUSH	<u> </u>	<u> </u>
4	88219271617117	BALWINDER SINGH	<u> </u>	<u> </u>
5	88219271617119	DINESH SHARMA	L	L
6	88219271617122	HARPREET SINGH	<u> </u>	<u> </u>
7	88219271617126	INDERJIT SINGH	<u> </u>	<u> </u>
8	88219271617128	KARANJEET SINGH	<u> </u>	<u> </u>
9	88219271617134	SHARANJIT SINGH	<u> </u>	<u> </u>
10	88219271617135	VIJAY KUMAR	<u> </u>	L
11	88219271617136	VIJAYDEEP SINGH	<u> </u>	

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

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2432 / INDUSTRIAL TRAINING INSTITUTE (W), URMUR TANDA Center Name: Course: 145 / ELECTRONICS MECHANIC Class: Third Subject: 99951 / TRADE THEORY Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent

filled correctly as per instructions. Name of the Deputy Controller

Signature of the Deputy Controller

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

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been

Name of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2432 / INDUSTRIAL TRAINING INSTITUTE (W) , URMUR TANDA

Course: 145 / ELECTRONICS MECHANIC Class: Third

Subject: 99952 / WORKSHOP CAL. & SCIENCE

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88219271616119	SHARANJIT SINGH	<u> </u>	
2	88219271617114	ABINASH		L
3	88219271617115	AMARJIT SINGH		L
4	88219271617116	ANKUSH		L
5	88219271617117	BALWINDER SINGH		L
6	88219271617119	DINESH SHARMA		L
7	88219271617122	HARPREET SINGH		L
8	88219271617126	INDERJIT SINGH		L
9	88219271617128	KARANJEET SINGH		L
10	88219271617134	SHARANJIT SINGH		L
11	88219271617135			
12	88219271617136	VIJAYDEEP SINGH		

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

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2432 / INDUSTRIAL TRAINING INSTITUTE(W), URMUR TANDA Center Name: Course: 145 / ELECTRONICS MECHANIC Class: Third Subject: 99952 / WORKSHOP CAL. & SCIENCE Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) ____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent

filled correctly as per instructions. Name of the Deputy Controller

Signature of the Deputy Controller

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

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been

Name of the Controller

2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2432 / INDUSTRIAL TRAINING INSTITUTE (W) , URMUR TANDA

Course: 145 / ELECTRONICS MECHANIC Class: Third

Subject: 99953 / ENGINEERING DRAWING

PAGE: 1

S.No	Regd. No.	Nar	me Of the Student	Answer Sheet No.	Student's Sign.
1	8821927161711	⁴ ABINASH	ł	1	L
2	8821927161711	⁵ AMARJIT	SINGH	1	L
3	8821927161711	6 ANKUSH		1	
4	8821927161711	¹⁷ BALWINI	DER SINGH	1	<u> </u>
5	8821927161711	¹⁹ DINESH	SHARMA	1	L
6	8821927161712	²² HARPRE	ET SINGH		
7	8821927161712	²⁶ INDERJI	ΓSINGH	<u> </u>	<u> </u>
8	8821927161712	²⁸ KARANJ	EET SINGH	<u> </u>	L
9	8821927161713	³⁴ SHARAN	JIT SINGH	<u> </u>	L
10	8821927161713	³⁵ VIJAY KU	JMAR	<u></u>	<u></u>
11	8821927161713	³⁶ VIJAYDE	EP SINGH	1	I

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

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2432 / INDUSTRIAL TRAINING INSTITUTE(W), URMUR TANDA Center Name: Course: 145 / ELECTRONICS MECHANIC Class: Third 99953 / ENGINEERING DRAWING Subject: Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent

filled correctly as per instructions. Name of the Deputy Controller

Signature of the Deputy Controller

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

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been

Name of the Controller

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2432 / INDUSTRIAL TRAINING INSTITUTE(W), URMUR TANDA

Course: 145 / ELECTRONICS MECHANIC Class: Third

Subject: 99955 / TRADE PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88219271617114	ABINASH	<u> </u>	L
2	88219271617115	_J AMARJIT SINGH	<u> </u>	L
3	88219271617116	_] ANKUSH	<u> </u>	L
4	88219271617117	BALWINDER SINGH	<u> </u>	L
5 <u> </u>	88219271617119	DINESH SHARMA	<u> </u>	L
6	88219271617122	HARPREET SINGH	<u> </u>	L
7	88219271617126	INDERJIT SINGH	<u> </u>	L
8 	88219271617128	KARANJEET SINGH	<u> </u>	L
9	88219271617134	SHARANJIT SINGH	<u> </u>	L
10	88219271617135	JVIJAY KUMAR	<u> </u>	L
11	88219271617136	JVIJAYDEEP SINGH	<u> </u>	L

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

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2432 / INDUSTRIAL TRAINING INSTITUTE (W), URMUR TANDA Center Name: Course: 145 / ELECTRONICS MECHANIC Class: Third Subject: 99955 / TRADE PRACTICAL Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent

filled correctly as per instructions. Name of the Deputy Controller

Signature of the Deputy Controller

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

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 of ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT 2432 / INDUSTRIAL TRAINING INSTITUTE (W), URMUR TANDA Center Name: Course : 222 / COMP. OP. PROGRAM. ASSISTANT Class: Second 99941 / TRADE THEORY Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88242171616171 | HARPREET SINGH 88242171617199 | RAMSAROOP SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2511 / INDUSTRIAL TRAINING INSTITUTE, MOGA

Course: 114 / PLUMBER Class: Second

Subject: 99932 / WORKSHOP CAL. & SCIENCE

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.	
1	88209162117003	GURWINDER SINGH			
2	88209162117004	JASPREET SINGH			
3	88209162117005	KARTAR SINGH	<u> </u>		
4	88209162117010	NAVDEEP SINGH			
5 	88209162117011	PRABHJOT SINGH			
6	88209162117012	PRABHJOT SINGH			
7	88209162117013	RAJKARAN SINGH			
8	88209162117015	SATNAM SINGH			
Tota	al No. Of Answer She ne and Signature Of	eets Packed >	sent:		
			Undertaki ng		
have	appeared under my su	(Designation) gilator. I have personally chec upervision in today's exam, have any mistakes are found, I will	e been filled and sha	hereby certify that I have conducted the t particulars of all the students who aded correctly in the OMR sheets. I also any remuneration.	
			Si gna	ture of the Invigilator	
	ve conducted 20% rand ed correctly as per i		the said examination	on and found that particulars have been	
Name of the Superintendent Signature of the Superintendent					
	I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.				
Name	Name of the Deputy Controller Signature of the Deputy Controller				
	ave conducted 5% rand ed correctly as per i		the said examination	on and found that particulars have been	
Name	of the Controller		Si gna	ture of the Controller	

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2511 / INDUSTRIAL TRAINING INSTITUTE, MOGA

Course: 114 / PLUMBER Class: Second

Subject: 99977 / EMPLOYABILITY SKILLS

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88209162117003	GURWINDER SINGH	<u> </u>	
2	88209162117004	JASPREET SINGH		
3	88209162117005	KARTAR SINGH	<u> </u>	<u> </u>
4	88209162117010	NAVDEEP SINGH	<u> </u>	<u> </u>
5 	88209162117011	PRABHJOT SINGH	<u> </u>	<u> </u>
6	88209162117012	PRABHJOT SINGH		<u> </u>
7	88209162117013	RAJKARAN SINGH		<u> </u>
8	88209162117015	SATNAM SINGH	l	[
Tota	al No. Of Answer She ne and Signature Of			
			Undertaki ng	
above have	nme) e examination as Invi appeared under my su by undertake that if	(Designation) gilator. I have personally chec pervision in today's exam, have any mistakes are found, I will	ked and ensured that been filled and sha	nereby certify that I have conducted the particulars of all the students who ided correctly in the OMR sheets. I also any remuneration.
			Si gnat	rure of the Invigilator
l hav fille	ve conducted 20% rand ed correctly as per i	lom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been
Name	of the Superintenden	t	Si gnat	cure of the Superintendent
l hav fille	ve conducted 10% rand ed correctly as per i	lom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been
Name	of the Deputy Contro	ller	Si gnat	ture of the Deputy Controller
l ha fille	nve conducted 5% rand ed correctly as per i	lom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been
Name	of the Controller		Si gnat	cure of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 1 of 1 Center Name:

2511 / INDUSTRIAL TRAINING INSTITUTE, MOGA

Course: 165 / HAIR & SKIN CARE

Class: Second

Subject: 99977 / EMPLOYABILITY SKILLS

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.	
1	88239162217001	JAMAN			
2	88239162217003	AMANDEEP KAUR	<u> </u>	<u> </u>	
3	88239162217007	AMANPREET KAUR	<u> </u>	1	
4	88239162217010				
5					
6	88239162217016	TVTA		<u> </u>	
7	88239162217034			<u> </u>	
Tot	al No. Of Answer She me and Signature Of		on.		
	3	3	Undertaki ng		
I (N abov have here	ame) re examination as Invi appeared under my su by undertake that if	(Designation) gilator. I have personally chec upervision in today's exam, have any mistakes are found, I will	h ked and ensured that been filled and sha	nereby certify that I have conducted the particulars of all the students who added correctly in the OMR sheets. I also any remuneration.	
			Si gnat	cure of the Invigilator	
l ha fill	ve conducted 20% rand ed correctly as per i	dom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been	
Name	of the Superintender	nt	Si gnat	cure of the Superintendent	
	I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.				
Name	of the Deputy Contro	oller	Si gnat	cure of the Deputy Controller	
	ave conducted 5% rand ed correctly as per i		the said examination	on and found that particulars have been	
Name	of the Controller		Si gnat	cure of the Controller	

PAGE: 1 of ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2511 / INDUSTRIAL TRAINING INSTITUTE, MOGA

Course :

175 / CUTTING SEW. & EMB. TEACHER'S TRAINING Class: First

17511 / PRINCIPLE OF EDUCATION Subject:

Name of the Controller

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88175167417001 | CHARNJEET KAUR 88175167517012 | PAWANDEEP KAUR Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller

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

Class: First

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 1 of 1 Center Name:

2511 / INDUSTRIAL TRAINING INSTITUTE, MOGA

Course: 175 / CUTTING SEW. & EMB. TEACHER'S TRAINING

Subject: 17512 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.	
1	88175167417001	CHARNJEET KAUR	<u> </u>		
2	88175167417003	HARJEET KAUR	<u> </u>	<u> </u>	
3	88175167417010	MANDEEP KAUR	<u> </u>	<u> </u>	
4	88175167417013	RAJPREET KAUR	<u> </u>	<u> </u>	
5	88175167517012	PAWANDEEP KAUR	<u> </u>	<u> </u>	
6	88175167517013	RANJEET KAUR	<u> </u>		
7	88175167517020	SIPPY RANI			
To	tal No. Of Students in tal No. Of Answer She me and Signature Of	eets Packed >	sent:		
			Undertaki ng		
abò\ have	e appeared under mv su	(Designation) gilator. I have personally chec upervision in today's exam, have any mistakes are found, I will	ked and ensured that been filled and sha	nereby certify that I have conducted the t particulars of all the students who aded correctly in the OMR sheets. I also any remuneration.	
			Si gnat	ture of the Invigilator	
l ha fill	ave conducted 20% rand ed correctly as per i	dom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been	
Name	e of the Superintender	nt	Si gnat	ture of the Superintendent	
l ha fill	I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.				
Name	e of the Deputy Contro	oller	Si gnat	ture of the Deputy Controller	
l h fill	nave conducted 5% rand ed correctly as per i	dom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been	
Name	e of the Controller		Si gnat	ture of the Controller	

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2511 / INDUSTRIAL TRAINING INSTITUTE, MOGA

Course: 222 / COMP. OP. PROGRAM. ASSISTANT

Class: Second

Subject: 99941 / TRADE THEORY

S.	.No Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.		
1	88242162117026	HARPREET SINGH				
2	88242162117032			L		
3		DAY/INDED KALID		<u> </u>		
4	88242162117038	CANIDEED CINICII				
	Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaking I (Name) hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.					
	I have conducted 20% ran	dom checking of the OMR sheet of	G	ure of the Invigilator		
I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.						
	Name of the Superintende	nt	Si gnati	ure of the Superintendent		
	I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.					
	Name of the Deputy Contr	oller	Si gnati	ure of the Deputy Controller		
	I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.					
	Name of the Controller		Si gnati	ure of the Controller		

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 of ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2511 / INDUSTRIAL TRAINING INSTITUTE, MOGA Course : 222 / COMP. OP. PROGRAM. ASSISTANT Class: Second 99945 / TRADE PRACTICAL Subject: Name Of the Student S.No Student's Sign. Regd. No. Answer Sheet No. 88242162217053 | CHRISTINA Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 1 of 1 Center Name:

2511 / INDUSTRIAL TRAINING INSTITUTE, MOGA

Course:

222 / COMP. OP. PROGRAM. ASSISTANT

Class: Second

Subject: 99977 / EMPLOYABILITY SKILLS

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.		
1	88242162117019	AMRITPAL SINGH		<u> </u>		
2	88242162117020	ANMOLDEEP SINGH				
3	88242162117025	HARJOT SINGH SIDHU				
4	88242162117033	NAVDEEP KUMAR				
5	88242162117036	RAVINDER KAUR				
6	88242162117038	SANDEEP SINGH				
7	88242162217066	MANPREET KAUR		 		
8	88242162217072	 SANDEEP KAUR				
9	88242162217078	TAMANNA PATHANIA		 		
Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge						
	Undertaki ng					
I (Name) hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.						
	Signature of the Invigilator					
	have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been illed correctly as per instructions.					
Name	e of the Superintendent Signature of the Superintendent					
l ha fill	ave conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been led correctly as per instructions.					
Name	ame of the Deputy Controller Signature of the Deputy Controller					
l h fill	I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.					

Signature of the Controller

Name of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

2511 / INDUSTRIAL TRAINING INSTITUTE, MOGA Center Name:

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	88370167316015	MANDEEP KAUR		<u>L</u>				
2	88370167317015	RAKHI KAURA	<u> </u>	1				
3	88370167317016	RANJIT SINGH	<u> </u>	<u> </u>				
4	88370167817007	_J DANIAL		<u> </u>				
5	88370167817014	KULJIT KAUR	<u> </u>	<u> </u>				
6	88370167817023	RAJDEEP KAUR	<u> </u>	<u> </u>				
7	88370167817024	RANJIT SINGH	<u> </u>	<u> </u>				
8	88370167817027	SHAM SINGH	<u> </u>	<u> </u>				
9	88370167817030	JASMEEN SEHGAL		<u> </u>				
То	Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge							
			Undertaki ng					
I (abo hav her	Name) ve examination as Invi e appeared under my su eby undertake that if	(Designation) gilator. I have personally chec upervision in today's exam, have any mistakes are found, I will	h ked and ensured that been filled and sha not be entitled for	nereby certify that I have conducted the particulars of all the students who uded correctly in the OMR sheets. I also any remuneration.				
Signature of the Invi				ture of the Invigilator				
l h fil	ave conducted 20% rand led correctly as per i	dom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been				
Nam	e of the Superintender	nt	Si gnat	ture of the Superintendent				
l h fil	ave conducted 10% rand led correctly as per i	dom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been				
Nam	e of the Deputy Contro	oller	Si gnat	ture of the Deputy Controller				
l fil	have conducted 5% rand led correctly as per i	dom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been				
Nam	e of the Controller		Si gnat	rure of the Controller				

Class: First

Signature of the Controller

1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

Center Name: 2511 / INDUSTRIAL TRAINING INSTITUTE, MOGA

Course: 370 / ART & CRAFTS

Subject: 17059 / DESIGN

Name of the Controller

PAGE: 1

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88370167317001 | BHUPINDER KAUR 88370167817024 | RANJIT SINGH 2 3 88370167817027 | SHAM SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2511 / INDUSTRIAL TRAINING INSTITUTE, MOGA Course : 370 / ART & CRAFTS Class: First 17070 / PRINCIPLES OF EDUCATION Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88370167817030 | JASMEEN SEHGAL Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent

Name of the Deputy Controller

filled correctly as per instructions.

Signature of the Deputy Controller

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

I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been

Name of the Controller

PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT Center Name: 2511 / INDUSTRIAL TRAINING INSTITUTE, MOGA Course : 370 / ART & CRAFTS Class: First 17071 / HISTORY & APPRECIATION OF ART Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88370167817027 | SHAM SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)______ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been

Signature of the Deputy Controller

Signature of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

No.Of Students On This Page >> Present>> Absent >> Name Of Invigilator Signature Of Invigilator

Name of the Deputy Controller

Name of the Controller

filled correctly as per instructions.

Center Name: 2511 / INDUSTRIAL TRAINING INSTITUTE, MOGA Course : 370 / ART & CRAFTS Class: First 17072 / COMP. AWARENESS & GRAPHICS (T) Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88370167316016 | MANDEEP SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

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

Name of the Controller

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Center Name: 2511 / INDUSTRIAL TRAINING INSTITUTE, MOGA

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	88370167316002	AMARDEEP KAUR	<u> </u>	
2	88370167316007	GURPREET KAUR	<u> </u>	L
3	88370167316015	MANDEEP KAUR	<u> </u>	L
4	88370167316016	MANDEEP SINGH	<u> </u>	L
5 	88370167316018	NAVJOT KAUR	<u> </u>	L
6	88370167317001	BHUPINDER KAUR	<u> </u>	L
7	88370167317003	DALJIT KAUR	<u> </u>	L
8	88370167317008	HARMANJIT KAUR	<u> </u>	L
9	88370167317014	POOJA SHARMA	<u> </u>	L
10	88370167317015	RAKHI KAURA	<u> </u>	L
11	88370167317016	RANJIT SINGH	<u> </u>	L
12	88370167816001	JAMANDEEP KAUR	<u> </u>	L
13	88370167817002	JAMANDEEP KAUR	<u> </u>	L
14	88370167817003	JAMARJEET KAUR	<u> </u>	L
15 	88370167817007	DANIAL	<u> </u>	L
16	88370167817008	GURPREET SINGH	<u> </u>	L
17	88370167817010	HEMANT AGGARWAL	<u> </u>	L
18	88370167817011	KAMALJEET KAUR	<u> </u>	L
19	88370167817014	KULJIT KAUR	<u> </u>	
20	88370167817015	 LACHHMI	<u> </u>	
21	88370167817023	RAJDEEP KAUR	<u> </u>	L

2 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 2 of 2 A Center Name: 2511 /

2511 / INDUSTRIAL TRAINING INSTITUTE, MOGA

Course: 370 / ART & CRAFTS Class: First

Subject: 17073 / GEOMETRICAL DRAWING

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.		
22	88370167817024	RANJIT SINGH	<u> </u>	<u></u>		
23				L		
24				<u> </u>		
25				<u> </u>		
Nai	Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaking I (Name) hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I als					
here	by undertake that if	any mistakes are found, I will	not be entitled for	any remuneration.		
l ha fill	ve conducted 20% rand ed correctly as per i	lom checking of the OMR sheet of nstructions.	g	ure of the Invigilator In and found that particulars have been		
Name of the Superintendent			Signature of the Superintendent			
I have conducted 10% random checking of the OMR sheet of the said examination and found that particula filled correctly as per instructions.				n and found that particulars have been		
Name of the Deputy Controller			Signature of the Deputy Controller			
l h fill	ave conducted 5% rand ed correctly as per i	lom checking of the OMR sheet of nstructions.	the said examinatio	n and found that particulars have been		
Name	of the Controller		Si gnat	ure of the Controller		

Center Name: 2511 / INDUSTRIAL TRAINING INSTITUTE, MOGA Course : 370 / ART & CRAFTS Class: Second 70055 / CRAFT(T) Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88370167816006 | GAGANDEEP SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) _____ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller

I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 1

Name of the Controller Signature of the Controller

filled correctly as per instructions.

1 ATTENDANCE CUM CHALLAN FORM - FOR Feb ' 2019 EXAMS -SCVT

PAGE: 1 of 1 ATTE Center Name: 2511 / INDU

2511 / INDUSTRIAL TRAINING INSTITUTE, MOGA

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	88370167316022	RAMANDEEP		
2	88370167816011	JASWINDER	<u> </u>	
3	88370967315008	GURSHARAN SINGH	<u> </u>	<u> </u>
4	88370967315013	JASBIR SINGH	<u> </u>	<u> </u>
5 	88370967315018	JASPREET KAUR	<u> </u>	<u> </u>
6	88370967315021	JASWINDER KAUR	<u> </u>	<u> </u>
7	88370967315023	RAJNI BALA		1
	al No. Of Answer Shome and Signature Of			
			Undertaki ng	
abòv have	e appeared under my su	(Designation)_ gilator. I have personally chec upervision in today's exam, have any mistakes are found, I will	ked and ensured that been filled and sha	nereby certify that I have conducted the particulars of all the students who aded correctly in the OMR sheets. I also any remuneration.
			Si gnat	cure of the Invigilator
l ha fill	ve conducted 20% rand ed correctly as per i	dom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been
Name	of the Superintender	nt	Si gnat	cure of the Superintendent
	ve conducted 10% rand ed correctly as per i		the said examination	on and found that particulars have been
Name of the Deputy Controller Signature of the Deputy Controller			cure of the Deputy Controller	
l h fill	ave conducted 5% rand ed correctly as per i	dom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been
Name	of the Controller		Si gnat	cure of the Controller