PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

Center Name: 1212 / INDUSTRIAL TRAINING INSTITUTE, LALRU

Course: 145 / ELECTRONICS MECHANIC

Class: Second

44424 / EMPLOYBILITY SKILL Subject:

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88219221319002	JAKASH	<u> </u>	
2	88219221319006	GURINDER SINGH	<u> </u>	
3	88219221319007	GURMEET SINGH	L	
4	88219221319011	HARPREET SINGH	L	
5	88219221319012	JATIN RANA	L	
6	88219221319013	LAKHWINDER SINGH	<u> </u>	
7	88219221319014	MANDEEP SINGH	<u> </u>	
8	88219221319016	NAVJOT SINGH	L	
9	88219221319017	RAJ KUMAR	L	
10	88219221319018	_] SAHIL	<u> </u>	
11	88219221319019	SAHIL KUMAR	<u> </u>	<u> </u>
12	88219221319020	SUKHMEET SINGH	<u> </u>	
13	88219221319021	SUKHVEER SINGH	<u> </u>	
14	88219221319022	SUMIT KUMAR	<u> </u>	
15	88219221319023	TUSHAR	<u> </u>	
16	88219221319024	JVIJAY KHAN	<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 Nov.' 2021 EXAMS -SCVT 1212 / INDUSTRIAL TRAINING INSTITUTE, LALRU Center Name: Course: 145 / ELECTRONICS MECHANIC Class: Second Subject: 44424 / EMPLOYBILITY SKILL 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

Name of the Superintendent

filled correctly as per instructions.

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random 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: 1212 / INDUSTRIAL TRAINING INSTITUTE, LALRU Course : 179 / TEXTILE WET PROCESSING TECHNICIAN Class: Second 44424 / EMPLOYBILITY SKILL Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88237221318015 | VISHAL SHARMA 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 Nov.' 2021 EXAMS -SCVT

PAGE: 1 of

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

filled correctly as per instructions.

Name of the Controller

1 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

Center Name: 1212 / INDUSTRIAL TRAINING INSTITUTE, LALRU

Course: 235 / SPINNING TECHNICIAN Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

PAGE: 1 of

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88235221319029 | AKASH MEHTA 88235221319031 | MANPREET SINGH 88235221319033 | SARBJEET 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

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

Center Name: 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course: 126 / MECHANIC (MOTOR VEHICLE)

Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88215211519059	BACHITAR SINGH	<u> </u>	L
2	88215211519060	DAMANPREET SINGH	<u> </u>	L
3	88215211519061	GURBIR SIGH	<u> </u>	L
4	88215211519062	GURSEWAK SINGH	<u> </u>	L
5	88215211519063	_J HAPPY SINGH	<u> </u>	L
6	88215211519064	JAGSIR SINGH	<u> </u>	L
7	88215211519065	KARANVEER SINGH	<u> </u>	L
8	88215211519066	LOVEPREET SINGH	<u> </u>	L
9	88215211519067	LOVEPREET SINGH	<u> </u>	L
10	88215211519068	MANDEEP SINGH	<u> </u>	L
11	88215211519069	NAIB SINGH	<u> </u>	L
12	88215211519070	JPAWAN SINGH	<u> </u>	L
13	88215211519071	JPAWITTAR SINGH	<u> </u>	L
14	88215211519072	_J RINKU SINGH	<u> </u>	L
15	88215211519073	SHIVJEET SINGH	<u> </u>	L
16	88215211519074	SIMRANJIT SINGH	<u> </u>	L
17	88215211519075	JSWARAN SINGH	<u> </u>	L
18	88215211519076	VARINDER SINGH	<u> </u>	L
19	88215211519077	VARINDER SINGH	<u> </u>	L

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT Center Name: 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA Course: 126 / MECHANIC (MOTOR VEHICLE) Class: Second Subject: 44424 / EMPLOYBILITY SKILL 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 Nov.' 2021 EXAMS -SCVT

Center Name: 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA

Course: 132 / ELECTRICIAN Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231211519078	Arshdeep Singh	<u> </u>	
2	88231211519079	Barinder Singh	<u> </u>	
3	88231211519080	Dawinder Singh	<u> </u>	
4	88231211519081	Gurpreet Singh	<u> </u>	
5	88231211519082	Jagdeep Singh	<u> </u>	
6	88231211519083	Jagwant Singh		
7	88231211519084	Karanveer Singh		
8	88231211519085	Kulwant Singh		
9	88231211519086	Kulwinder Singh		
10	88231211519087	Pardeep Singh		
11	88231211519088	Piratpal Singh		
12	88231211519089	Randeep Singh		
13	88231211519090	Ravi Singh		
14	88231211519091	Sharanjeet Singh		
15	88231211519092	Shivom Singh	<u> </u>	
16	88231211519093	Sukhdev Singh	<u> </u>	
17	88231211519094	Varinder Singh		
18	88231211519095	Varinder 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 Nov.' 2021 EXAMS -SCVT 1213 / INDUSTRIAL TRAINING INSTITUTE, NABHA Center Name: Course: 132 / ELECTRICIAN Class: Second Subject: 44424 / EMPLOYBILITY SKILL 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 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

Center Name: 1214 / INDUSTRIAL TRAINING INSTITUTE, PATIALA

Course: 132 / ELECTRICIAN Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231211119178	ARSHPREET SINGH		L
2	88231211119179	ASHOK KUMAR		L
3	88231211119180	AVTAR SINGH		I
4	88231211119184	GURPREET SINGH		
5	88231211119185	GURWINDER SINGH		
6	88231211119186	JASVIR SINGH		
7	88231211119188	KULWINDER SINGH		L
8	88231211119189	KULWINDER SINGH		L
9	88231211119190	PARWINDER SINGH		L
10	88231211119192	RINKU SINGH		L
11	88231211119194	SATNAM SINGH		
12	88231211119195	SHARANDEEP 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 Nov.' 2021 EXAMS -SCVT
Center Name: 1214 / INDUSTRIAL TRAINING INSTITUTE, PATIALA
Course: 132 / ELECTRICIAN Class: Second

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

44424 / EMPLOYBILITY SKILL

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

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 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

Center Name: 1214 / INDUSTRIAL TRAINING INSTITUTE, PATIALA

Course: 657 / MECHANIC CONSUMER ELECTRONICS APPLIANCES

Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88049211119021	JABDUL KHAN	<u> </u>	L
2	88049211119024	ARASHDEEP SINGH	<u> </u>	<u> </u>
3	88049211119028	GURDEEP SHARMA	<u> </u>	<u> </u>
4	88049211119034	HARPREET SINGH	<u> </u>	<u> </u>
5 	88049211119035	HARPREET SINGH	<u> </u>	<u> </u>
6	88049211119036	HUSANPREET SINGH	<u> </u>	<u> </u>
7	88049211119037	JIMRAN ALI	<u> </u>	L
8	88049211119040	JATNISH VERMA		L
9	88049211119041	KAMALPREET SINGH		L
10	88049211119043	KARAN		L
11	88049211119044	KARANJOT SINGH		I
12	88049211119046	LAKHWINDER SINGH		L
13	88049211119048	LOVEPREET SINGH		L
14	88049211119050	NARINDERJEET SINGH		L
15 	88049211119051	NISHAN SINGH		L
16	88049211119054	ROHIT KUMAR		L
17	88049211119056	SANJIT KUMAR		L
18	88049211119059	SOURAV		
19	88049211119060	SOURAV KUMAR		
20	88049211119061	SUKHCHAIN SINGH		
21	88049211119062	SUKHVEER SINGH		
				······································

PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

Center Name:

1214 / INDUSTRIAL TRAINING INSTITUTE, PATIALA

Course :

657 / MECHANIC CONSUMER ELECTRONICS APPLIANCES

44424 / EMPLOYBILITY SKILL Subject:

Name Of the Student | Answer Sheet No. S.No Student's Sign. Regd. No. 88049211119064 | TANVEER KAUR 88049211119066 VARINDER SINGH 23 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

Class: Second

ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR Center Name:

Course: 132 / ELECTRICIAN Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231223319021	BALWINDER KUMAR		
2	88231223319022	BINDU		
3	88231223319023	CHANPREET SINGH		
4	88231223319024	DAVINDER SINGH		
5	88231223319025	GAGANDEEP SINGH		
6	88231223319026	GAGANPREET SINGH		
7	88231223319027	HARMAN SINGH		
8 	88231223319028	HARMANJEET SINGH		
9	88231223319029	HARVINDER SINGH		
10	88231223319030	IQBAL SINGH		
11	88231223319031	JAGDEEP SINGH		
12	88231223319032	 JASKARAN SINGH		
13	88231223319033	 MANPREET SINGH		
14	88231223319034	NARINDER PAL		
15	88231223319035	NIKHIL BHARDWAJ		
16	88231223319036	PARAMJEET SINGH		
17	88231223319037	PARDEEP KUMAR		
18	88231223319038	RAKHANJIT SINGH		
19	88231223319039	SUKHPREET SINGH		
20	88231223319040	' SUKHPREET SINGH	<u> </u>	
		·		

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT 1311 / INDUSTRIAL TRAINING INSTITUTE, ROPAR Center Name: Course: 132 / ELECTRICIAN Class: Second Subject: 44424 / EMPLOYBILITY SKILL 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 Nov.' 2021 EXAMS -SCVT

Center Name: 1312 / INDUSTRIAL TRAINING INSTITUTE, NANGAL

Course: 132 / ELECTRICIAN Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231220319032	AVTAR SINGH	<u> </u>	<u> </u>
2	88231220319033	BHARAT BHUSHAN	<u> </u>	L
3	88231220319034	GURDEEP SINGH	<u> </u>	L
4	88231220319035	GURPREET SINGH	<u> </u>	L
5	88231220319036	GURPREET SINGH	<u> </u>	L
6	88231220319037	HARDEEP SINGH	<u> </u>	L
7	88231220319038	JAGIR SINGH	<u> </u>	L
8	88231220319039	JASVEER SINGH	<u> </u>	L
9	88231220319040	JASVIR SINGH	<u> </u>	L
10	88231220319042	MUNISH KUMAR	<u> </u>	L
11	88231220319043	ONKAR SINGH	<u> </u>	L
12	88231220319044	RAHUL KUMAR		
13	88231220319045	ROHIT KUMAR		
14	88231220319046	SAHIL KUMAR		
15	88231220319047	SANDEEP SINGH		
16 _I	88231220319048	SARABJEET 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 Nov.' 2021 EXAMS -SCVT 1312 / INDUSTRIAL TRAINING INSTITUTE, NANGAL Center Name: Course: 132 / ELECTRICIAN Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

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 Nov.' 2021 EXAMS -SCVT

Center Name: 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course: 128 / FITTER Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

PAGE: 1

S.No	Regd. No.	1	Name Of the Student	Answer Sheet No.	Student's Sign.
1	8822722601900 ⁻	¹ ABHIS	HEK GUPTA	 	
2	8822722601900	2 AMRIT	PAL SINGH	-	
3	8822722601900	3 GURKI	RISHAN SINGH		
4	8822722601900	5 GURSI	EWAK SINGH		
5	8822722601900	6 GURTI	EJ SINGH		
6	8822722601900	7 HARDI	EEP SINGH		
7	8822722601900	⁸ JAGJIT	SINGH		
8	8822722601900	9 JASNC	OOR SINGH		
9	8822722601901	4 _] RANW	INDER SINGH		
10	8822722601901	⁵ _J RAVI V	/ERMA		
11	8822722601901	⁶ SABAF	RDEEN		
12	8822722601901	7 _] SATVE	ER SINGH		
13	8822722601901	⁸ _J SIMRA	NPAL SINGH		
14	8822722601901	⁹ _J SUKH(CHAIN SINGH		
15	8822722601902	NNUS SUNN			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 Nov.' 2021 EXAMS -SCVT
Center Name: 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI
Course: 128 / FITTER Class: Second
Subject: 44424 / EMPLOYBILITY SKILL

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

Undertaking
I (Name) ______ (Designation) ______ hereby certify that I have cond

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 Nov.' 2021 EXAMS -SCVT

Center Name: 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course: 132 / ELECTRICIAN Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

PAGE: 1

15

•				
S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231226019021	JAMAN KHAN		<u></u>
2	88231226019022	DAVINDERJEET DHIMAN		<u> </u>
3	88231226019023	GAGANDEEP SINGH		<u> </u>
4	88231226019024	GURDEEP SINGH		<u>L</u>
5	88231226019025	GURJANT SINGH		L
6	88231226019027	HARMAN SINGH		<u> </u>
7	88231226019028	HARVINDER SINGH		
8	88231226019029	JAGDEEP SINGH		
9	88231226019031	JATINDER SINGH		
10	88231226019032	KAMALJEET SINGH		
11	88231226019034	LOVEPREET SINGH		I
12	88231226019035	RAJBIR SINGH		l
13	88231226019037	SANJAY KHAN		l
14	88231226019039	SUKHDEV SINGH		I

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

88231226019040 | SUKHRAJ SINGH

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 Nov.' 2021 EXAMS -SCVT
Center Name: 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI
Course: 132 / ELECTRICIAN Class: Second
Subject: 44424 / EMPLOYBILITY SKILL

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 Nov.' 2021 EXAMS -SCVT

Center Name: 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI

Course: 142 / DRAUGHTSMAN (MECHANICAL)

Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88224221119002	_] ARCHANA	<u> </u>	L
2	88224221119004	GURBHINDER KAUR		L
3	88224221119005	GURPREET KAUR		L
4	88224221119006	HARPREET KAUR		L
5	88224221119007	JASHANPREET KAUR		
6	88224221119008	JYOTI		
7	88224221119010	MAMTA MEHRA		
8	88224221119011	MANPREET KAUR		
9	88224221119012	MEGHA RANI		
10	88224221119013	NAVPREET KAUR		
11	88224221119014	NEHA		
12	88224221119016	VARINDER KAUR		

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 Nov.' 2021 EXAMS -SCVT Center Name: 1334 / INDUSTRIAL TRAINING INSTITUTE (W) , MOHALI Course: 142 / DRAUGHTSMAN (MECHANICAL) Class: Second Subject: 44424 / EMPLOYBILITY SKILL 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 Nov.' 2021 EXAMS -SCVT

Center Name: 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course: 132 / ELECTRICIAN Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231231119044	JAMANDEEP SINGH		
2	88231231119045	DAVINDER SINGH	L	L
3	88231231119046	JGURGAGAN SINGH	L	L
4	88231231119047	GURPREET SINGH	L	L
5 	88231231119048	GURTEJ SINGH	L	L
6	88231231119049	HARDEEP SINGH	<u> </u>	L
7	88231231119050	HARPREET SINGH	<u> </u>	L
8	88231231119051	JAGSEER SINGH	<u> </u>	L
9	88231231119052	JASHANPREET SINGH	L	L
10 	88231231119053	KINDER SINGH	L	L
11	88231231119054	MANINDERDEEP SINGH	<u> </u>	L
12	88231231119055	MANPREET SINGH	<u> </u>	L
13	88231231119056	JMEWA SINGH	<u> </u>	L
14	88231231119057	SUKHWINDER RAM	<u> </u>	L
15 	88231231119058	SURINDER SINGH	<u> </u>	L
16	88231231119059	_J THAKUR VINOD	 	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 Nov.' 2021 EXAMS -SCVT Center Name: 1412 / INDUSTRIAL TRAINING INSTITUTE, BARNALA

Course: 132 / ELECTRICIAN Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

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 Nov.' 2021 EXAMS -SCVT

Center Name: 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course: 128 / FITTER Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88227264719001	JAMARDEEP SINGH	<u> </u>	1
2	88227264719007	GURJOT SINGH	<u> </u>	1
3	88227264719009	HARMANDEEP SINGH		1
4	88227264719010	HARSIMRAN SINGH		
5	88227264719011	LUKHVIR SINGH		1
6	88227264719014	JMOHAMMAD ISMILE		1
7	88227264719016	NAVDEEP SINGH	<u> </u>	1
8	88227264719018	SEHAJPREET SINGH		1
9	88227264719020	SUKHMAN SINGH	1	I
Tot	al No. Of Students in al No. Of Answer Sho me and Signature Of	eets Packed >	sent:	
			Undertaki ng	
I (N abov have here	dame) re examination as Invi e 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	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 gnat	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 Superintender	nt	Si gna	ture of the Superintendent
I 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	oller	Si gnat	ture of the Deputy Controller
l h fill	ave conducted 5% randed 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 gna	ture of the Controller

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

Center Name: 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course: 129 / TURNER Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88221230219045	JAJAY BATHEJA	<u> </u>	<u> </u>
2	88221230219046	_] AMITOZ SINGH	<u> </u>	<u> </u>
3	88221230219047	JAMOLAK SINGH	<u> </u>	<u> </u>
4	88221230219048	JANMOL SINGH	<u> </u>	<u> </u>
5	88221230219050	DATINDER SINGH	<u> </u>	<u> </u>
6	88221230219052	DHARMINDER SINGH	<u> </u>	<u> </u>
7	88221230219054	GABBAR SINGH	<u> </u>	L
8	88221230219055	GURPAL SINGH	<u> </u>	L
9	88221230219058	JASVEER SINGH	<u> </u>	L
10	88221230219060	LOVEPREET SINGH		L
11	88221230219061	MANISH KUMAR		L
12	88221230219062	MANPREET SINGH		L
13	88221230219063	MUNISH KUMAR		<u> </u>
14	88221230219064	S K PARTEEK GILL	<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 Nov.' 2021 EXAMS -SCVT

Center Name: 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course: 129 / TURNER Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

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

ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course: 132 / ELECTRICIAN Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

Center Name:

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231230219104	JAMANDEEP SINGH	<u> </u>	L
2	88231230219105	JAMRITPAL SINGH	L	L
3	88231230219107	ARSHDEEP SINGH	L	L
4	88231230219108	BALJINDER SINGH	L	L
5 	88231230219109	GURNAIB SINGH	L	L
6 	88231230219110	GURPREET SINGH	L	L
7	88231230219111	GURWINDER SINGH		L
8	88231230219112	JAGDEEP SINGH	L	L
9	88231230219113	JAGSEER SINGH	L	L
10	88231230219115	JAPINDERPAL SINGH	L	L
11	88231230219116	KULDEEP SINGH	L	L
12	88231230219117	KULDIP SINGH		L
13	88231230219118	KULVIR SINGH	<u> </u>	L
14	88231230219119	RAJVEER SINGH	<u> </u>	L
15 	88231230219120	RAJVEER SINGH	L	L
16	88231230219121	SANDEEP SINGH	L	L
17	88231230219122	SUKHVEER SINGH	L	L
18	88231230219123	JSWARAN SINGH	L	L
19	88231264719021	JABHISHEK KUMAR	L	L
20	88231264719022	JDEEPAK KUMAR		
21	88231264719024	GURSEVAK SINGH		
				·

PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

Center Name: 1413 / INDUSTRIAL TRAINING INSTITUTE, MALERKOTLA

Course: 132 / ELECTRICIAN Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88231264719025	GURVIR SINGH		
23	88231264719030	KULWINDER SINGH		
24	88231264719031	MANVIR SINGH		
25 	88231264719033	MOHAMMAD AADIL		
26	88231264719036	SAHIL KHAN		
27	88231264719037	SATNAM SINGH		
28	88231264719038	SIMARPREET SINGH		
29	88231264719040	SUKHVEER SINGH		I
Tota	II No. Of Students III II No. Of Answer She ne and Signature Of	eets Packed >	sent:	
			Undertaki ng	
above have	me) eexamination as Invi appeared under my su y undertake that if	(Designation)_ gilator. I have personally che upervision in today's exam, have any mistakes are found, I will	cked and ensured tha 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
l hav fille	re conducted 20% rand ed correctly as per i	dom checking of the OMR sheet on nstructions.	f the said examination	on and found that particulars have been
Name	of the Superintender	nt	Si gna	ture of the Superintendent
l hav fille	re conducted 10% rand ed correctly as per i	dom checking of the OMR sheet on nstructions.	f the said examination	on and found that particulars have been
Name	of the Deputy Contro	oller	Si gna	ture of the Deputy Controller
l ha fille	ve conducted 5% rand d correctly as per i	dom checking of the OMR sheet on nstructions.	f the said examination	on and found that particulars have been
Name	of the Controller		Si gna	ture of the Controller

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

Center Name: 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course: 127 / MECHANIC AGRICULTURE MACHINERY Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88216230619049	AMRITPAL SINGH		<u> </u>
2	88216230619052	2 _J GOBIND SINGH		L
3	88216230619054	JGURPREET SINGH		L
4	88216230619057	JHARMAIL SINGH		L
5 	88216230619060	JASHANPREET SINGH		L
6	88216230619062	LOVEPREET SINGH		L
7	88216230619064	¹ MANJEET SINGH		<u>L</u>
8	88216230619065	MINTU SINGH		<u>L</u>
9	88216230619066	PARMOD RAVIDAS		L
10	88216230619067	PARMVEER SINGH		L
11	8821623061907	SANDEEP SINGH	1	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 Nov.' 2021 EXAMS -SCVT

Center Name: 1414 / INDUSTRIAL TRAINING INSTITUTE, SUNAM

Course: 127 / MECHANIC AGRICULTURE MACHINERY Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

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

ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

Center Name: 2113 / INDUSTRIAL TRAINING INSTITUTE, JASSOWAL KULLAR

Course: 132 / ELECTRICIAN Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231261119021	JGURDEEP SINGH	<u> </u>	<u></u>
2	88231261119022	GURSHARAN SINGH	L	L
3	88231261119023	HARMANJOT SINGH	<u> </u>	L
4	88231261119024	HARPREET SINGH	<u> </u>	L
5 	88231261119025	JAGDEEP SINGH	<u> </u>	L
6	88231261119026	JAGROOP SINGH	<u> </u>	L
7	88231261119027	JAGTAR SINGH	<u> </u>	L
8	88231261119029	MANDEEP SINGH	L	L
9	88231261119030	NAVPREET SINGH	L	L
10	88231261119031	PARDEEP SINGH	<u> </u>	L
11	88231261119033	ROBIN SINGH SANDHU	L	L
12	88231261119034	ROHIT SINGH		L
13	88231261119035	SARABJIT SINGH		
14	88231261119036	SIMRANJIT SINGH		
15	88231261119037	SUKHWINDER SINGH		
16	88231261119038	SUMANDEEP SINGH		
17	88231261119039	YUVRAJ 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>> 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 Nov.' 2021 EXAMS -SCVT
Center Name: 2113 / INDUSTRIAL TRAINING INSTITUTE, JASSOWAL KULLAR
Course: 132 / ELECTRICIAN Class: Second
Subject: 44424 / EMPLOYBILITY SKILL

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

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

Undertaki ng

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random 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 Nov.' 2021 EXAMS -SCVT

Center Name: 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA

Course: 132 / ELECTRICIAN Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231260119045	ANUJ KUMAR	<u> </u>	L
2	88231260119046	DHANISH HIRA	<u> </u>	L
3	88231260119047	DILBARJIT SINGH	<u> </u>	L
4	88231260119048	DILPREET SINGH	<u> </u>	L
5	88231260119049	GURADESH SINGH	<u> </u>	L
6	88231260119050	GURWINDER SINGH	<u> </u>	L
7	88231260119051	HARI SINGH	<u> </u>	L
8	88231260119052	INDERPREET SINGH	<u> </u>	L
9	88231260119053	JASWINDER SINGH	<u> </u>	L
10	88231260119054	KUNAL KOHLI	<u> </u>	L
11	88231260119056	MANPREET SINGH	<u> </u>	L
12	88231260119057	NAVDEEP SINGH	<u> </u>	L
13	88231260119058	PARMINDER SINGH	<u> </u>	L
14	88231260119059	PARMINDER SINGH	<u> </u>	L
15 	88231260119060	RAHUL	<u> </u>	L
16	88231260119061	RANJIT	<u> </u>	L
17	88231260119062	ROHIT KUMAR CHOUHAN	<u> </u>	L
18	88231260119063	SUJAL KUMAR		
19	88231260119064	TARANVEER SINGH		

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT 2114 / INDUSTRIAL TRAINING INSTITUTE, LUDHIANA Center Name: Course: 132 / ELECTRICIAN Class: Second Subject: 44424 / EMPLOYBILITY SKILL 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.

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.

Name of the Controller

PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

Center Name: 2116 / INDUSTRIAL TRAINING INSTITUTE, MANUKE

Course: 126 / MECHANIC (MOTOR VEHICLE)

Class: Second

44424 / EMPLOYBILITY SKILL Subject:

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88215260619027	BHUPINDER SINGH		
2	88215260619028	CHAND SINGH		
3	88215260619029	DHARWINDER SINGH		
4	88215260619030	GURWINDER SINGH		L
5	88215260619032	HARPREET SINGH		L
6	88215260619033	JASHANPREET SINGH		
7	88215260619034	JASVIR SINGH		
8	88215260619035	JOBANPREET SINGH		
9	88215260619039	LOVEPREET SINGH		
10	88215260619040	PAWANDEEP SINGH		
11	88215260619041	RAJBIR SINGH		
12	88215260619042	SUKHPAL 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 Nov.' 2021 EXAMS -SCVT Center Name: 2116 / INDUSTRIAL TRAINING INSTITUTE, MANUKE Course: 126 / MECHANIC (MOTOR VEHICLE) Class: Second Subject: 44424 / EMPLOYBILITY SKILL 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

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

Center Name: 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA

Course: 126 / MECHANIC (MOTOR VEHICLE)

Class: Second

44424 / EMPLOYBILITY SKILL Subject:

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88215260519030	AKASHDEEP SINGH	<u> </u>	L
2	88215260519031	JAMRITPAL SINGH	<u> </u>	L
3	88215260519032	_J AVTAR SINGH	<u> </u>	L
4	88215260519033	DILPREET SINGH	<u> </u>	L
5	88215260519036	GURPINDER SINGH	L	L
6	88215260519037	GURPREET SINGH	<u> </u>	L
7	88215260519038	GURSHARAN SINGH	<u> </u>	L
8	88215260519039	GURTEJ SINGH	<u> </u>	L
9	88215260519041	HARSHPREET SINGH	<u> </u>	L
10	88215260519042	JAGJIT SINGH	<u> </u>	L
11	88215260519043	JASHANPREET SINGH	<u> </u>	L
12	88215260519045	NARINDER SINGH	<u> </u>	L
13	88215260519046	SAHIJPREET SINGH	<u> </u>	L
14	88215260519047	SANDEEP SINGH	<u> </u>	L
15	88215260519049	TAKHAT SINGH	 	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 Nov.' 2021 EXAMS -SCVT

Center Name: 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA

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

Subject: 44424 / EMPLOYBILITY SKILL

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

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

Center Name: 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA

Course: 129 / TURNER Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88221260719021	JAMANDEEP SINGH		
2	88221260719022	ANBAR KHAN		
3	88221260719023	JANIL KUMAR	<u> </u>	
4	88221260719027	GURJANT SINGH	L	
5	88221260719029	HARMANPREET SINGH DH	<u> </u>	
6	88221260719034	MANJINDER SINGH	<u> </u>	
7	88221260719035	PRINCE KUMAR	<u> </u>	
8	88221260719036	RAJIV KUMAR	L	
9	88221260719038	SATWINDER SINGH	L	
10	88221260719039	SUKHWINDER SINGH		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 Nov.' 2021 EXAMS -SCVT 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA Center Name:

Course: **129 / TURNER**

Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

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 Nov.' 2021 EXAMS -SCVT

Center Name: 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA

Course: 132 / ELECTRICIAN Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231260719040	JAKASH KUMAR	<u> </u>	L
2	88231260719041	BALJINDER SINGH		L
3	88231260719042	CHARANJEET SINGH	<u> </u>	L
4	88231260719043	GURMEL SINGH	<u> </u>	L
5 	88231260719045	HIMANSHU SHARMA	<u> </u>	L
6	88231260719047	JUGRAJ SINGH		L
7	88231260719048	JUGRAJ SINGH		L
8	88231260719049	KARANDEEP SINGH		
9	88231260719050	LAKHVEER SINGH		
10	88231260719051	MANINDER SINGH		
11	88231260719052	MANJIT SINGH		
12	88231260719053	MEHAKDEEP SINGH		
13	88231260719054	RAMAN SHARMA		
14	88231260719055	RAMANDEEP SINGH		
15	88231260719056	RAVINDERPREET SINGH		
16	88231260719057	SIMRAN SINGH		
17	88231260719058	SUKHWINDER SINGH		
18 _l	88231260719059	TARANPREET 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 Nov.' 2021 EXAMS -SCVT 2117 / INDUSTRIAL TRAINING INSTITUTE, SAMRALA Center Name: Course: 132 / ELECTRICIAN Class: Second Subject: 44424 / EMPLOYBILITY SKILL 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: 2231 / INDUSTRIAL TRAINING INSTITUTE (W), JALANDHAR Course : 128 / FITTER Class: Second 44424 / EMPLOYBILITY SKILL Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88227270319008 | BALWINDER KUMAR 88227270319010₁POJIA 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 Nov.' 2021 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 of 1

Signature of the Controller

Signature of the Deputy Controller

2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

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

Course: 132 / ELECTRICIAN Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

PAGE: 1

15

S.No	Regd. No.		Name Of the Student	Answer Sheet No.	Student's Sign.
1	882312703190)14 _] AN	IL KUMAR		
2	882312703190	16 AV	INASH KUMAR		
3	882312703190)17 _] AV	TAR SINGH		
4	882312703190	18 BA	LWINDER SINGH		
5	882312703190	¹²⁰ GC	DBINDA		
6	882312703190	121 GL	JRWINDER SINGH		
7	882312703190)22 _] HA	RDIK CHOPRA		
8	882312703190)25 M,2	NPREET SINGH		
9	882312703190)26 ML	JKUL CHUMBER		
10	882312703190)27 PR	ADEEP SINGH		
11	882312703190	⁾²⁸ RC	BIN SINGH		
12	882312703190	¹²⁹ SA	LINDER SINGH		
13	882312703190	³⁰ VE	ER SINGH		
14	882312703190)31 _{VI}	JAY VIKRAM		

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

88231270319032 | VISHAL MEHRA

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 Nov.' 2021 EXAMS -SCVT
Center Name: 2231 / INDUSTRIAL TRAINING INSTITUTE (W) , JALANDHAR
Course: 132 / ELECTRICIAN Class: Second
Subject: 44424 / EMPLOYBILITY SKILL

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

Undertaking

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random 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 Nov.' 2021 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 126 / MECHANIC (MOTOR VEHICLE)

Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88215271119223	JAMIT KUMAR		1
2	88215271119224	JDEEPAK SIDHU		1
3	88215271119225	GAGAN DEEP SINGH		1
4	88215271119226	GURWINDER SINGH		1
5 	88215271119228	MANPREET SINGH		1
6	88215271119229	JOMKAR SINGH		1
7	88215271119231	RAVINDER SINGH		1
8	88215271119232	SUKHWINDER SINGH		1
9	88215271119234	JSUNNY BANSAL		1
Tota	al No. Of Students in al No. Of Answer She ne and Signature Of	eets Packed >	sent:	
			Undertaki ng	
I (Na above have herek	ame) e examination as Invi 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	cked and ensured that e 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
	ve conducted 20% randed correctly as per i		f the said examination	on and found that particulars have been
Name	of the Superintender	nt	Si gna	ture of the Superintendent
	ve conducted 10% rand ed correctly as per i		f the said examinatio	on and found that particulars have been
Name	of the Deputy Contro	ol I er	Si gnat	ture of the Deputy Controller
l ha fille	ave conducted 5% rand ed correctly as per i	dom checking of the OMR sheet o nstructions.	f the said examinatio	on and found that particulars have been

Signature of the Controller

Name of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name:

Course: 128 / FITTER Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88227271119235	ABHISHEK		
2	88227271119236	AKASHDEEP		
3	88227271119237	ARSH MAHEY	L	
4	88227271119238	CHANDAN KUMAR	<u> </u>	
5 	88227271119239	DAVINDER SINGH	L	
6	88227271119240	KARAN	<u> </u>	
7	88227271119241	KULDEEP SINGH	<u> </u>	
8	88227271119242	LAKHVINDER SINGH	L	
9	88227271119243	_] MOHIT	L	
10	88227271119244	NAVDEEP SINGH	L	
11	88227271119245	PROBHJOT	L	
12	88227271119246	RAHUL	L	
13	88227271119247	ROHIT HEERA	<u> </u>	
14	88227271119248	ROHIT KUMAR SAHNI	<u> </u>	
15	88227271119249	SARBJIT SINGH	L	
16	88227271119250	SUKHVIR SINGH	L	
17	88227274319001	ABHISHEK KUMAR	L	
18	88227274319002	AMIT KUMAR	L	
19	88227274319007	HARPREET	<u> </u>	
20	88227274319008	MANISH		
21	88227274319009	MOHIT MATHARU		
				

ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

PAGE: 2 of 2 Center Name:

2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 128 / FITTER

Name of the Controller

Class: Second

ubject :	44424 /	EMPLOYBILITY	SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.		
22	88227274319010	PARDEEP SAHNI		<u> </u>		
23	88227274319013	SADA RAM		L		
24	88227274319015	SHIV LAL				
25	88227274319016	SHIVAM		L		
26	88227274319017	SHUBHAM	<u> </u>	L		
27	88227274319018	SUKHWANT SINGH		L		
28	88227274319019	VISHAL DAROCH		L		
29	88227274319020	VIVEK		L		
Tot	Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge					
			Undertaki ng			
abòv 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	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 examinatio	n and found that particulars have been		
Name	Name of the Superintendent Signature of the Superintendent					
	I have 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% ranc ed correctly as per i	dom 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 Nov.' 2021 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 129 / TURNER Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88221271119001	JAMANDEEP		L
2	88221271119005	DEEPANSHU		L
3	88221271119006	DHARMVIR SINGH		L
4	88221271119007	GURDEEP SINGH		L
5 	88221271119008	HARPREET SINGH		L
6	88221271119010	JASKIRAT SINGH		L
7	88221271119011	JASPAL SINGH		L
8	88221271119012	KARAMJIT SINGH		L
9	88221271119015	PALWINDER SINGH		L
10	88221271119016	SARBPREET SINGH		L
11	88221271119017	SATVEER SINGH		L
12	88221271119018	TARA SINGH		L
13	88221271119020	ıVIPAN	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 Nov.' 2021 EXAMS -SCVT
Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR
Course: 129 / TURNER Class: Second
Subject: 44424 / EMPLOYBILITY SKILL

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

2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

Course: 132 / ELECTRICIAN Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231271119251	JAJAY KUMAR		L
2	88231271119253	DEEPAK		
3	88231271119254	GAURAV KUMAR	<u> </u>	L
4	88231271119255	GURPREET SINGH	<u> </u>	<u> </u>
5	88231271119256	HARPREET	<u> </u>	<u> </u>
6	88231271119257	HARSH	<u> </u>	<u> </u>
7	88231271119258	JASDEEP SINGH	<u> </u>	<u> </u>
8	88231271119259	MUKESH KUMAR	<u> </u>	<u> </u>
9	88231271119261	RAHUL KUMAR CHOPAL	<u> </u>	<u> </u>
10	88231271119262	RAMANAND KRISHAN PAR	<u> </u>	<u> </u>
11	88231271119263	SARBJIT SINGH	<u> </u>	<u> </u>
12	88231271119264	SATNAM SINGH	<u> </u>	<u> </u>
13	88231271119265	TAJINDER 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 Nov.' 2021 EXAMS -SCVT 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name: Course: 132 / ELECTRICIAN Class: Second Subject: 44424 / EMPLOYBILITY SKILL

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

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

Answer Sheet No.

Student's Sign.

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

S.No

Regd. No.

Course: 143 / DRAUGHTSMAN (CIVIL) Class: Second

Name Of the Student

Subject: 44424 / EMPLOYBILITY SKILL

3.NO			Aliswei Sileetivo.	
1	88217271119021	AAMIR SAJAT		
2	88217271119022	AMANJOT KAUR		
3	88217271119024	ANKIT KUMAR		
4	88217271119025	ANKUSH		
5	88217271119026	ARSHDEEP DAROCH		
6	88217271119027	ARVIND		
7	88217271119028	BALJIT SINGH		
8	88217271119029	CHARANJIT SINGH		
9	88217271119030	GAGANDEEP SINGH		
10	88217271119032	GURHARMANPREET		
11	88217271119034	INDERJIT SINGH		
12	88217271119036	JASPREET SINGH		
13	88217271119038	JYOTI SINGH		
14	88217271119039	LOVEJOT SINGH		L
15 	88217271119040	PRINCE SINGH		L
16 	88217271119041	RAMANDEEP		
17 	88217271119043	SATNAM SINGH		
18	88217271119044	SURINDER 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 Nov.' 2021 EXAMS -SCVT 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name: Course: 143 / DRAUGHTSMAN (CIVIL) Class: Second Subject: 44424 / EMPLOYBILITY SKILL 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 Nov.' 2021 EXAMS -SCVT

Center Name: 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR

657 / MECHANIC CONSUMER ELECTRONICS APPLIANCES Course:

Class: Second

44424 / EMPLOYBILITY SKILL Subject:

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88049271119045	JABHAY	L	<u></u>
2	88049271119048	GURKIRAT SINGH		<u> </u>
3	88049271119056	LAKHVIR SINGH	L	L
4	88049271119058	LOVEPREET SINGH	L	L
5 	88049271119059	JMONEY KUMAR	L	L
6	88049271119060	RAMANDEEP SINGH	<u> </u>	L
7	88049271119061	SAHIL	<u> </u>	L
8	88049271119063	SARBJIT SINGH	L	L
9	88049271119064	SOURAV	L	 L
10	88049271119067	VIVEK BHARDWAJ		

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 Nov.' 2021 EXAMS -SCVT 2413 / INDUSTRIAL TRAINING INSTITUTE, HOSHIARPUR Center Name: 657 / MECHANIC CONSUMER ELECTRONICS APPLIANCES Course: Class: Second Subject: 44424 / EMPLOYBILITY SKILL 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

3 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course: 139 / MECH. REF. & AIR CONDITIONING

Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

Center Name:

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88218271519002	AKASH	<u> </u>	L
2	88218271519003	JAMAN KUMAR	<u> </u>	L
3	88218271519004	JAMARPREET SINGH	<u> </u>	L
4	88218271519005	JAMRIT SINGH	<u> </u>	L
5	88218271519006	JANKIT KUMAR	<u></u>	L
6	88218271519007	JAVINASH KUMAR	<u> </u>	L
7	88218271519008	JAVTAR SANDHU	<u></u>	L
8	88218271519009	DEEPAK KUMAR	<u> </u>	L
9	88218271519010	JGANESH KUMAR	<u> </u>	L
10	88218271519012	GURJINDER SINGH	<u> </u>	L
11	88218271519014	JHAPPY	<u> </u>	L
12	88218271519015	HARDEEP SINGH	<u> </u>	L
13	88218271519018	JAIDEV SINGH	<u> </u>	L
14	88218271519019	JASWINDER SINGH	<u> </u>	L
15 	88218271519020	JATIN BALI	<u> </u>	L
16	88218271519022	KARAN	<u> </u>	L
17	88218271519023	KARANDEEP SINGH	<u> </u>	L
18	88218271519024	_] KRITIK	<u> </u>	L
19	88218271519025	KULDEEP KUMAR	<u></u>	L
20	88218271519026	_J LAKSHDEEP	<u> </u>	
21	88218271519028	LOVEPREET SINGH	<u> </u>	L

PAGE: 2 of 3 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course: 139 / MECH. REF. & AIR CONDITIONING

Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

Center Name:

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22 	88218271519029	MANJIT SINGH	<u> </u>	L
23	88218271519031	NARINDER SINGH	<u> </u>	L
24	88218271519034	PARAMJEET SINGH	<u> </u>	L
25 	88218271519036	PARDEEP SINGH	<u> </u>	L
26 	88218271519037	PARDEEP SINGH	<u> </u>	L
27	88218271519038	PAWAN KUMAR	<u> </u>	L
28	88218271519039	RAJAN	<u> </u>	L
29 	88218271519040	RAJNISH KUMAR	<u> </u>	L
30	88218271519042	ROHIT KUMAR	<u> </u>	L
31 	88218271519043	SAJIB KUMAR	<u> </u>	L
32 	88218271519044	SANDEEP	<u> </u>	L
33	88218271519046	SUNIL KUMAR	<u> </u>	L
34	88218271519047	JVIPAN KOUNDAL	<u></u>	L
35 	88218271519048	VISHAL	<u> </u>	L
36 	88218271519092	Abhishek	<u> </u>	L
37 	88218271519093	Ankit Kumar	<u> </u>	L
38	88218271519094	Ankush	<u> </u>	L
39 	88218271519095	Gurpreet Singh	<u> </u>	L
40	88218271519096	Gurpreet Singh	<u> </u>	
41	88218271519097	Harpreet singh	 	
42	88218271519098	Jog Raj	<u></u>	

Class: Second

Signature of the Controller

3 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

PAGE: 3 of Center Name:

2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course: 13

139 / MECH. REF. & AIR CONDITIONING

Subject: 44424 / EMPLOYBILITY SKILL

S.No Name Of the Student Regd. No. Student's Sign. Answer Sheet No. 43 88218271519099 | Karnveer Singh 44 88218271519100 Lovedeep singh 45 88218271519101 | Maninder Singh 88218271519102 _I Rajesh Kumar 46 88218271519103 _I Rohit 47 48 88218271519104 | Satwinder Singh 88218271519105 | Vishal Singh 49 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

Class: Second

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA

Course: 657 / MECHANIC CONSUMER ELECTRONICS APPLIANCES

Subject: 44424 / EMPLOYBILITY SKILL

Center Name:

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88049271519068	JAKSHAY	<u> </u>	L
2	88049271519069	AMARJIT SINGH		<u> </u>
3	88049271519070	JANIL SHARMA		L
4	88049271519071	JANKUSH		L
5 	88049271519072	JANURAG SHARMA	<u> </u>	<u> </u>
6	88049271519073	BARUN KUMAR		<u> </u>
7	88049271519074	JASWINDER KUMAR	<u> </u>	<u> </u>
8	88049271519075	LOVEDEEP	<u> </u>	<u> </u>
9	88049271519077	_J MANISH KUMAR	<u> </u>	<u> </u>
10	88049271519078	NEERAJ KUMAR	<u> </u>	<u> </u>
11	88049271519079	PARDEEP SINGH		L
12	88049271519081	RAHUL SINGH		L
13	88049271519082	RAJATSAIN	<u> </u>	<u> </u>
14	88049271519083	RAKESH KUMAR	<u> </u>	<u> </u>
15 	88049271519084	RAMANPREET SINGH	<u> </u>	<u> </u>
16 	88049271519086	SHRAVAN SINGH	<u> </u>	<u> </u>
17 	88049271519087	SUKHVIR SINGH	<u> </u>	<u> </u>
18	88049271519088	SUNNY KUMAR	<u> </u>	<u> </u>
19	88049271519089	SUSHIL KUMAR	<u> </u>	
20	88049271519090	JVISHAL KUMAR	<u></u>	<u></u>
21	88049271519091	JVISHAL RANA	<u> </u>	<u> </u>

PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT 2415 / INDUSTRIAL TRAINING INSTITUTE, TALWARA Center Name: 657 / MECHANIC CONSUMER ELECTRONICS APPLIANCES Course: Class: Second Subject: 44424 / EMPLOYBILITY SKILL 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 Nov.' 2021 EXAMS -SCVT

Center Name: 2431 / INDUSTRIAL TRAINING INSTITUTE, (W) HOSHIARPUR

Course: 132 / ELECTRICIAN Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231271319002	JABISHEK	<u> </u>	<u>L</u>
2	88231271319004	AVISHEK	<u> </u>	<u> </u>
3	88231271319005	BARINDER KUMAR	<u> </u>	<u> </u>
4	88231271319006	CHANDAN PRABHAKAR	<u> </u>	<u> </u>
5	88231271319008	GURPREET SINGH	<u> </u>	<u> </u>
6	88231271319010	KUNALDEEP SINGH	<u> </u>	<u> </u>
7	88231271319012	MANVIR SINGH	<u> </u>	<u> </u>
8	88231271319016	ROHIT KUMAR	<u> </u>	<u> </u>
9	88231271319018	SHAM SUNDER	<u> </u>	<u> </u>
10	88231271319019	SUMIT	<u> </u>	<u> </u>
11	88231271319020	JVIVEK 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

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 Nov.' 2021 EXAMS -SCVT 2431 / INDUSTRIAL TRAINING INSTITUTE, (W) HOSHIARPUR Center Name: Course: 132 / ELECTRICIAN Class: Second Subject: 44424 / EMPLOYBILITY SKILL 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 Nov.' 2021 EXAMS -SCVT

Center Name: 2432 / INDUSTRIAL TRAINING INSTITUTE(W), URMUR TANDA

Course: 132 / ELECTRICIAN Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231271619041	JAMANDEEP SINGH		<u></u>
2	88231271619042	JANKUSH KUMAR		<u> </u>
3	88231271619043	BALJINDER SINGH		L
4	88231271619044	BALRAM KUMAR		L
5	88231271619046	GAGANDEEP KUMAR		<u> </u>
6	88231271619047	HARINDER SINGH		<u> </u>
7	88231271619049	HARPREET SINGH		L
8	88231271619051	JATINDER PAL		<u> </u>
9	88231271619053	_J PETER		<u> </u>
10	88231271619054	_J RAHUL MEHRA		<u> </u>
11	88231271619055	RAJVEER SINGH SAINI		<u> </u>
12	88231271619056	RANJOT SINGH		<u> </u>
13	88231271619057	TARLOK SINGH		L
14	88231271619059	JVIKRAM 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 Nov.' 2021 EXAMS -SCVT 2432 / INDUSTRIAL TRAINING INSTITUTE (W), URMUR TANDA Center Name: Course: 132 / ELECTRICIAN Class: Second 44424 / EMPLOYBILITY SKILL 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 Nov.' 2021 EXAMS -SCVT

Center Name: 2432 / INDUSTRIAL TRAINING INSTITUTE(W), URMUR TANDA

Course: 145 / ELECTRONICS MECHANIC Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88219271619062	JAJAY KUMAR		L
2	88219271619063	JAJAY KUMAR	<u> </u>	L
3	88219271619064	BALJINDER SINGH	<u> </u>	L
4	88219271619065	GURJINDER SINGH	<u> </u>	L
5 <u> </u>	88219271619067	HARDEEP SINGH	<u> </u>	L
6	88219271619068	HARJOT SINGH		L
7	88219271619070	JASKARAN	<u> </u>	L
8	88219271619071	JASPAL	<u> </u>	<u> </u>
9	88219271619074	LOVEPREET SINGH	<u> </u>	L
10	88219271619077	NAVDEEP SINGH	<u> </u>	L
11	88219271619078	PARAMJIT SINGH	<u> </u>	L
12	88219271619079	PARMVIR SINGH		L
13	88219271619080	PAWAN KUMAR		L
14	88219271619082	REHMAN		L
15	88219271619084	UPINDER 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 Nov.' 2021 EXAMS -SCVT 2432 / INDUSTRIAL TRAINING INSTITUTE (W), URMUR TANDA Center Name: Course: 145 / ELECTRONICS MECHANIC Class: Second Subject: 44424 / EMPLOYBILITY SKILL 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 Nov.' 2021 EXAMS -SCVT

Center Name: 3115 / INDUSTRIAL TRAINING INSTITUTE, LOPOKE

Course: 125 / WIREMAN Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88232291019049	JAMRITPAL SINGH	<u> </u>	L
2	88232291019050	ANKUSH NAYYAR	<u> </u>	L
3	88232291019051	ARASHDEEP SINGH	<u> </u>	L
4	88232291019052	AVTAR SINGH		L
5	88232291019053	GAGANDEEP SINGH RANA		L
6	88232291019054	GURPREET SINGH		L
7	88232291019055	GURSAHIB SINGH	<u> </u>	L
8	88232291019056	GURWINDER SINGH		L
9	88232291019057	HARMANPREET SINGH		L
10	88232291019058	HARPREET SINGH		L
11	88232291019059	HARSIMRAN SINGH		L
12	88232291019060	JOBAN SINGH		
13	88232291019062	KAWALJIT KAUR		
14	88232291019063	NAVDEEP SINGH		
15	88232291019064	PRINCE SINGH		
16	88232291019065	RANJIT SINGH		
17	88232291019066	ROHIT KUMAR		
18	88232291019067	SAKATTER 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 Nov.' 2021 EXAMS -SCVT 3115 / INDUSTRIAL TRAINING INSTITUTE, LOPOKE Center Name: Course: 125 / WIREMAN Class: Second Subject: 44424 / EMPLOYBILITY SKILL 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 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

Center Name: 3115 / INDUSTRIAL TRAINING INSTITUTE, LOPOKE

Course: 132 / ELECTRICIAN Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231291019109	Ajay		L
2	88231291019110	Baljinder Singh		
3	88231291019111	Baljit Singh	L	L
4	88231291019112	Gurpal Singh	<u> </u>	
5 <u> </u>	88231291019113	Gurwinder Singh	<u> </u>	
6	88231291019115	Harpreet Singh		
7	88231291019116	Inderbir Singh		
8	88231291019118	Karandeep Singh		
9	88231291019120	Lovepreet Singh		
10	88231291019121	Lovepreet Singh		L
11	88231291019122	Manbir Singh		
12	88231291019123	Manpreet Singh		
13	88231291019124	Navneet Singh		
14	88231291019125	Rajwinder Singh		
15	88231291019127	Sandeep Singh		
16	88231291019128	Vishal 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 Nov.' 2021 EXAMS -SCVT

Center Name: 3115 / INDUSTRIAL TRAINING INSTITUTE, LOPOKE

Course: 132 / ELECTRICIAN Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

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 Nov.' 2021 EXAMS -SCVT Center Name: 3131 / INDUSTRIAL TRAINING INSTITUTE, (W) AMRITSAR Course : 143 / DRAUGHTSMAN (CIVIL) Class: Second 44424 / EMPLOYBILITY SKILL Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88217290219003 | MANJOT KAUR 88217290219006 SIMRANJIT 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

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

Center Name:

3133 / INDISTRIAL TRAINING INSTITUTE, (W) TARAN TARAN

Course: 126 / MECHANIC (MOTOR VEHICLE)

Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.		
1	88215292319017	_] Ajay pal	<u> </u>	<u> </u>		
2	88215292319020	Davinder singh	<u> </u>	<u> </u>		
3	88215292319021	Davinder singh	<u> </u>	<u> </u>		
4	88215292319023	Gurjeet singh	<u> </u>	<u> </u>		
5 <u> </u>	88215292319025	Harvinder Singh	<u> </u>	<u> </u>		
6	88215292319027	Jashandeep Singh	<u> </u>	<u> </u>		
7	88215292319028	Jaswinder singh	<u> </u>	<u> </u>		
8	88215292319031	Sukhraj singh		1		
Tota	al No. Of Students in al No. Of Answer Sho me and Signature Of	eets Packed >	sent:			
			Undertaki ng			
abòve have	ame)_ e examination as Invi appeared under my si by 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	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		
	ve conducted 20% randed correctly as per i		the said examination	on and found that particulars have been		
Name of the Superintendent Signature of the Superintendent						
l hav fille	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 Contro	oller	Si gnat	ture of the Deputy Controller		
l ha	ave conducted 5% randed correctly as per i	dom checking of the OMR sheet of instructions.	the said examination	on and found that particulars have been		
Name	of the Controller		Si gnat	ture of the Controller		

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

Center Name: 3133 / INDISTRIAL TRAINING INSTITUTE, (W) TARAN TARAN

Course: 128 / FITTER Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88227292219001	Gurlal Singh	<u> </u>	L
2	88227292219004	Harpreet Singh	L	L
3	88227292219005	Harpreet Singh/	L	L
4	88227292219006	Husanpreet Singh	L	L
5	88227292219008	Malkeet Singh	L	L
6	88227292219009	_] Manjit Singh	<u> </u>	L
7	88227292219011	Paramjit Singh/	<u> </u>	L
8	88227292219012	_] Raideep singh	<u> </u>	L
9	88227292219014	_] Shivraj Singh	<u> </u>	L
10	88227292219015	Sukhchain Singh	L	L
11	88227292219016	Sukhraj Singh	 	

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

Total No. Of Answer Sheets Packed >

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT 3133 / INDISTRIAL TRAINING INSTITUTE, (W) TARAN TARAN Center Name: Course: 128 / FITTER Class: Second 44424 / EMPLOYBILITY SKILL 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

1 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

Center Name: 3133 / INDISTRIAL TRAINING INSTITUTE, (W) TARAN TARAN

Course: 129 / TURNER Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

PAGE: 1

S.No Name Of the Student Regd. No. | Student's Sign. Answer Sheet No. 88221292219017 _| Akashdeep Singh 88221292219020 | Amritpal Singh 2 3 88221292219022 | Arundeep Singh 88221292219024 | Gurbhej Singh 5 88221292219025 Gurditt Singh 88221292219026 | Jatinder Singh 88221292219033 | Surinder 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 have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller I have conducted 5% random checking of the OMR 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 Nov.' 2021 EXAMS -SCVT

Center Name: 3189 / GOVT ITI RANJIT AVENUE, AMRITSAR

Course: 132 / ELECTRICIAN Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

PAGE: 1

12

13

14

15

16

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88231294219002 | ANGREJ SINGH 2 88231294219003 | DALJIT SINGH 3 88231294219004 | DILBAG SINGH 88231294219005 | HARMANJIT SINGH 5 88231294219007 | JASHANPREET SINGH 88231294219008 _|JASKARN PREET SINGH 88231294219009 | KHUSHWANT SINGH 88231294219010 | KRISHAN SINGH 88231294219012 | MALKIT SINGH 10

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

88231294219013_|PRABHJEET SINGH

88231294219016 | SAHIBPREET SINGH

88231294219017 | VARYAM SINGH

88231294219018 | VIPONJOT SINGH

88231294219014 | PRINCE

88231294219015 | RAM SINGH

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 Nov.' 2021 EXAMS -SCVT Center Name: 3189 / GOVT ITI RANJIT AVENUE, AMRITSAR

Course: 132 / ELECTRICIAN Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

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 Nov.' 2021 EXAMS -SCVT

PAGE: 1 of 1 Center Name:

3189 / GOVT ITI RANJIT AVENUE, AMRITSAR

Course:

139 / MECH. REF. & AIR CONDITIONING

Class: Second Subject: 44424 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88218294219021	ARJUN KUAMR	1	
2	88218294219022	GURJIT SINGH		
3	88218294219023	GURPREET SINGH		
4	88218294219025	JATANDEEP SINGH	1	
5 	88218294219028	MANPREET SINGH		
6	88218294219029	NITIK KUMAR		
7	88218294219030	RAKESH SINGH		
8	88218294219033	VARINDER SINGH		
Tota	al No. Of Students in all No. Of Answer Shene and Signature Of	eets Packed >	osent:	
			Undertaki ng	
have	e examination as Invi appeared under my su	(Designation) gilator. I have personally che pervision 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 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		f the said examinati	on and found that particulars have been
Name	of the Superintenden	nt	Si gna	ture of the Superintendent
l hav fille	ve conducted 10% rand ed correctly as per i	lom checking of the OMR sheet o nstructions.	of the said examinati	on and found that particulars have been
Name	of the Deputy Contro	ller	Si gna	ture of the Deputy Controller
	ave conducted 5% randed correctly as per i		of the said examination	on and found that particulars have been
Name	of the Controller		Si gna	ture of the Controller

2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

Center Name: 3212 / INDUSTRIAL TRAINING INSTITUTE, BATALA

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

Subject: 44424 / EMPLOYBILITY SKILL

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88215280519042	AKASHDEEP SINGH	<u> </u>	<u></u>
2	88215280519043	ARSHDEEP SINGH	<u> </u>	L
3	88215280519048	JOBANJIT SINGH	L	L
4	88215280519049	KAMALPREET SINGH	L	L
5	88215280519051	LALIT KUMAR	L	L
6	88215280519052	LOVEPREET SINGH	L	L
7	88215280519053	ONKAR SINGH	<u> </u>	L
8	88215280519054	PRINCE BHAGAT	L	L
9	88215280519057	SAGAR	L	L
10	88215280519058	SAHIL KUMAR	L	L
11	88215280519059	SANDEEP KUMAR		L

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

Total No. Of Answer Sheets Packed >

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT Center Name: 3212 / INDUSTRIAL TRAINING INSTITUTE, BATALA Course: 126 / MECHANIC (MOTOR VEHICLE) Class: Second Subject: 44424 / EMPLOYBILITY SKILL 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

Name of the Superintendent

filled correctly as per instructions.

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random 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 Nov.' 2021 EXAMS -SCVT

Center Name: 3212 / INDUSTRIAL TRAINING INSTITUTE, BATALA

Course: 128 / FITTER Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88227280519060	AMRITPAL SINGH		
2	88227280519062	HARDEV SINGH		
3	88227280519063	INDERJIT SINGH	<u> </u>	<u> </u>
4	88227280519066	LOVEPREET SINGH	<u> </u>	<u> </u>
5 	88227280519067	NISHAN SINGH	<u> </u>	<u> </u>
6	88227280519069	RANJIT SINGH		<u> </u>
7	88227280519070	RANJIT SINGH		
8	88227280519071	SATNAM SINGH	1	I
Tota	al No. Of Answer She ne and Signature Of	eets Packed >	sent:	
			Undertaki ng	
above have	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 hav fille	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 Contro	oller	Si gnat	cure of the Deputy Controller
l ha	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

of 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

Center Name: 3212 / INDUSTRIAL TRAINING INSTITUTE, BATALA

Course: 132 / ELECTRICIAN Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231280519002	ARSHDEEP SINGH	<u> </u>	<u> </u>
2	88231280519003	GAGANDEEP SINGH	<u> </u>	L
3	88231280519005	JATIN KUMAR	<u> </u>	L
4	88231280519006	JOBANDEEP SINGH	<u> </u>	L
5	88231280519008	KARAN SHARMA	<u> </u>	L
6	88231280519009	LAKHBIR SINGH	<u> </u>	L
7	88231280519011	LOVEPREET SINGH	<u> </u>	L
8	88231280519012	PAWAN KUMAR	<u> </u>	L
9	88231280519013	RAHUL	<u> </u>	L
10	88231280519014	ROHIT	<u> </u>	L
11	88231280519015	ROMANPREET		L
12	88231280519017	SAJANPREET SINGH		L
13	88231280519018	SARABJEET SINGH		L
14	88231280519020	 SUKHRAJ SINGH		

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

Total No. Of Answer Sheets Packed >

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING
PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT
Center Name: 3212 / INDUSTRIAL TRAINING INSTITUTE, BATALA
Course: 132 / ELECTRICIAN Class: Second
Subject: 44424 / EMPLOYBILITY SKILL

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 Nov.' 2021 EXAMS -SCVT

Center Name: 3212 / INDUSTRIAL TRAINING INSTITUTE, BATALA

Course: 139 / MECH. REF. & AIR CONDITIONING

Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88218280519072	JAKASH JAREWAL		
2	88218280519073	JANIKET JAREWAL	<u> </u>	
3	88218280519074	DILBAGH SINGH		
4	88218280519075	_] HRITIK		
5	88218280519076	_] MOHIT		
6	88218280519077	_J PARSOTAM		
7	88218280519078	PAWAN KUMAR		
8	88218280519079	JPAWANJIT SINGH		
9	88218280519080	PRABHJOT SINGH		
10	88218280519082	SANDEEP SINGH		
11	88218280519083	SARBJIT SINGH		
12	88218280519084	SHALU		
13	88218280519086	SUNIL SINGH		
14	88218280519087	SUNNY KUMAR		
· 	 -			

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

Total No. Of Answer Sheets Packed >

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING
PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT
Center Name: 3212 / INDUSTRIAL TRAINING INSTITUTE, BATALA
Course: 139 / MECH. REF. & AIR CONDITIONING Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

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

1 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

PAGE: 1 of 1 ATTENDANC Center Name: 3214 / INDUSTRIAL

3214 / INDUSTRIAL TRAINING INSTITUTE, GURDASPUR

Course: 128 / FITTER Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

Student's Sign. S.No Name Of the Student Regd. No. Answer Sheet No. 88227280319203 _| ABHISHEK 88227280319206 | GURMEET SAGAR 3 88227280319207 | HARSH KUMAR 88227280319208 | MUNISH KUMAR 5 88227280319209 | MUNISH KUMAR 88227280319210₁RAJAT 88227280319212 | ROHIT KALOTRA 88227280319214 | SUKHPAL 88227280319215 | YASH PREET 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 Nov.' 2021 EXAMS -SCVT

Center Name: 3214 / INDUSTRIAL TRAINING INSTITUTE, GURDASPUR

Course: 129 / TURNER Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

S.N	0	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1		88221280319217	MANDEEP KUMAR		
2		88221280319218	MILAN SINGH		
3		88221280319221			
4		88221280319223	CIDLIADTII		
5		88221280319224			L
6	ĺ	88221280319225			
	Name	e and Signature Of	Incharge	Undertaki ng	
		No. Of Answer Shee and Signature Of		Undertaki ng	
h	ave a	ppeared under my su	(Designation) gilator. I have personally che pervision in today's exam, havany mistakes are found, I will	ve been filled and st I not be entitled for	•
l f	have illed	conducted 20% rand correctly as per i	om checking of the OMR sheet onstructions.	9	ature of the Invigilator on and found that particulars have been
N	ame o	f the Superintenden	t	Si gna	ature of the Superintendent
l f	have illed	conducted 10% rand correctly as per i	om checking of the OMR sheet onstructions.	of the said examinati	on and found that particulars have been
N	ame o	f the Deputy Contro	ller	Si gna	ature of the Deputy Controller
f	I hav illed	re conducted 5% rand correctly as per i	om checking of the OMR sheet onstructions.	of the said examinati	on and found that particulars have been
N	ame o	f the Controller		Si gna	ature of the Controller

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

Center Name: 3214 / INDUSTRIAL TRAINING INSTITUTE, GURDASPUR

Course: 132 / ELECTRICIAN Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231280319049	AARTI	<u> </u>	L
2	88231280319050	AJAY	<u> </u>	
3	88231280319052	ARSHIT	<u> </u>	
4	88231280319053	DEEPAK KUMAR	<u> </u>	
5 	88231280319055	GURMUKH SINGH	<u> </u>	
6	88231280319056	GURPREET SINGH	<u> </u>	
7	88231280319058	JASKARAN SINGH	<u> </u>	
8	88231280319059	JONY	<u> </u>	
9	88231280319060	NITISH KUMAR	<u> </u>	
10	88231280319061	PRINCE	<u> </u>	L
11	88231280319062	RAHUL KUMAR	<u> </u>	L
12	88231280319063	RAJAN		
13	88231280319064	RAJAN KUMAR		
14	88231280319065	ROBIN SAINI		L
15	88231280319066	SARABJIT SINGH	<u> </u>	L
16	88231280319067	SHUBHAM KUMAR		
17	88231280319068	VIPUL		L

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

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT Center Name: 3214 / INDUSTRIAL TRAINING INSTITUTE, GURDASPUR

Course: 132 / ELECTRICIAN Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

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 Nov.' 2021 EXAMS -SCVT

Center Name: 3214 / INDUSTRIAL TRAINING INSTITUTE, GURDASPUR

Course: 139 / MECH. REF. & AIR CONDITIONING Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88218280319069	ABISHEK	<u> </u>	<u> </u>
2	88218280319070	AKASH	<u>[</u>	<u> </u>
3	88218280319072	BALWINDER SAINI	<u> </u>	<u></u>
4	88218280319073	DILPREET SINGH	<u> </u>	<u></u>
5	88218280319074	HARPREET SINGH	<u> </u>	<u></u>
6	88218280319075	JAGROOP SINGH	<u> </u>	<u></u>
7	88218280319077	JATINDER SINGH		<u></u>
8	88218280319078	KARAN	<u> </u>	<u></u>
9	88218280319079	KARTIK	<u>[</u>	<u> </u>
10	88218280319080	MANPREET SINGH	<u>[</u>	<u> </u>
11	88218280319081	MUNISH KUMAR	<u>[</u>	<u> </u>
12	88218280319082	MUNISH KUMAR	<u>[</u>	<u></u>
13	88218280319083	PARDEEP KUMAR	<u> </u>	<u> </u>
14	88218280319084	PARMDEEP SINGH	<u> </u>	<u></u>
15	88218280319085	RAGAV DEEP	<u>[</u>	<u></u>
16	88218280319087	RAKESH KUMAR	<u>[</u>	<u> </u>
17	88218280319088	SATINDER SINGH		
18	88218280319091	VIKRAM		

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

Total No. Of Answer Sheets Packed >

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT 3214 / INDUSTRIAL TRAINING INSTITUTE, GURDASPUR Center Name: Course: 139 / MECH. REF. & AIR CONDITIONING Class: Second Subject: 44424 / EMPLOYBILITY SKILL 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 Nov.' 2021 EXAMS -SCVT

Center Name: 3214 / INDUSTRIAL TRAINING INSTITUTE, GURDASPUR

S.No

Regd. No.

Course: 143 / DRAUGHTSMAN (CIVIL) Class: Second

Name Of the Student

44424 / EMPLOYBILITY SKILL Subject:

1	88217280319093	AVINASH		
2	88217280319094	DINESH MAHAJAN	<u> </u>	L
3	88217280319095	HARDEEP BAINS	<u> </u>	L
4	88217280319098	KAMALJEET	<u> </u>	L
5	88217280319099	KAMALJIT SINGH		
6	88217280319101	KARANDEEP SHARMA		
7	88217280319105	MOHIT ALOONA		L
8	88217280319106	PAWAN KUMAR	<u> </u>	L
9	88217280319110	ROBERT GILL	<u> </u>	L
10	88217280319112	SHUBHAM KUMAR	<u> </u>	L
11	88217280319113	SOURAV KUMAR		
12	88217280319114	VISHAL SHARMA		

Answer Sheet No.

Student's Sign.

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

Total No. Of Answer Sheets Packed >

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT 3214 / INDUSTRIAL TRAINING INSTITUTE, GURDASPUR Center Name: Course: 143 / DRAUGHTSMAN (CIVIL) Class: Second Subject: 44424 / EMPLOYBILITY SKILL 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 Nov.' 2021 EXAMS -SCVT

Center Name: 3214 / INDUSTRIAL TRAINING INSTITUTE, GURDASPUR

Course: 145 / ELECTRONICS MECHANIC Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88219280319115	AKASHDEEP SINGH	<u> </u>	
2	88219280319117	ARUN KUMAR	<u> </u>	<u> </u>
3	88219280319120	GAGAN KUMAR	<u> </u>	<u> </u>
4	88219280319124	JONY KUMAR	<u> </u>	<u> </u>
5	88219280319125	KETAN	<u> </u>	<u> </u>
6	88219280319126	KRISHAN KUMAR	<u> </u>	<u> </u>
7	88219280319127	LOVEDEEP SINGH	<u> </u>	<u> </u>
8	88219280319128	MUNEET KUMAR SHARMA	<u> </u>	<u> </u>
9	88219280319129	RAHUL	<u> </u>	<u> </u>
10	88219280319131	SOURAV	<u> </u>	<u> </u>
11	88219280319135	VISHAL SINGH		I

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

Total No. Of Answer Sheets Packed >

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING
PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT
Center Name: 3214 / INDUSTRIAL TRAINING INSTITUTE, GURDASPUR
Course: 145 / ELECTRONICS MECHANIC Class: Second
Subject: 44424 / EMPLOYBILITY SKILL

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

Signature of the Controller

Name of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

PAGE: 1 of 1 Center Name:

3215 / INDUSTRIAL TRAINING INSTITUTE, KALANAUR

143 / DRAUGHTSMAN (CIVIL)

Course: Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88217280619083	_] AKASHDEEP	<u> </u>	<u> </u>
2	88217280619084	AKASHDEEP SINGH	<u> </u>	<u> </u>
3	88217280619086	JAMRITPAL SINGH	<u> </u>	<u> </u>
4	88217280619087	ARSHDEEP SINGH	<u> </u>	<u> </u>
5	88217280619089	BALDEEP SINGH	<u> </u>	<u> </u>
6	88217280619090	BALJIT SINGH	<u> </u>	<u> </u>
7	88217280619098	JASHANPREET SINGH	<u> </u>	<u> </u>
8	88217280619101	MEHTAB SINGH		1
Tota	al No. Of Students in al No. Of Answer Sho ne and Signature Of	eets Packed >	sent:	
			Undertaki ng	
have	e examination as Invi 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 t particulars of all the students who aded correctly in the OMR sheets. I also any remuneration.
			Si gnat	ture of the Invigilator
	ve conducted 20% randed correctly as per i		the said examination	on and found that particulars have been
Name	of the Superintender	nt	Si gnat	ture of the Superintendent
l hav fill∈	ve conducted 10% randed 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	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	ture of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

Center Name: 3215 / INDUSTRIAL TRAINING INSTITUTE, KALANAUR

Course: 145 / ELECTRONICS MECHANIC

Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.		
1	88219280619105	AKASH MASIH				
2	88219280619108	DILPREET SINGH	<u> </u>	<u> </u>		
3	88219280619110	GURJOT SINGH	L			
4	88219280619112	GURSHARANPREET SINGF	L	L		
5	88219280619114	LOVEPREET MASIH	L	L		
6	88219280619116	MALKIT SINGH	L	L		
7	88219280619119	MANJOT SINGH	L	L		
8	88219280619125	SIMRANJIT SINGH	L	L		
9	88219280619128	TRIPATPAL SINGH		L		
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	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 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			
l ha fill	ve conducted 10% rand ed correctly as per i	om checking of the OMR sheet of nstructions.	the said examinatio	n and found that particulars have been		
Name	of the Deputy Contro	ller	Si gnat	ure of the Deputy Controller		
	ave conducted 5% rand ed correctly as per i		the said examinatio	n and found that particulars have been		
Name	of the Controller		Si gnat	ure of the Controller		

2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

Center Name: 3217 / INDUSTRIAL TRAINING INSTITUTE, BAMIAL

Course: 654 / MACHINIST Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88222281119048	JAKASH KUMAR	<u> </u>	L
2	88222281119049	JAMIT THAKUR	<u> </u>	L
3	88222281119050	JARJUN KUMAR	<u> </u>	L
4	88222281119051	DALWINDER KUMAR	L	L
5 <u> </u>	88222281119053	JDIMPAL	<u> </u>	L
6	88222281119054	GAGAN KUMAR	<u> </u>	L
7	88222281119055	HARSHDEEP	<u> </u>	L
8	88222281119056	KULJINDER SINGH	L	L
9	88222281119057	MANISH KUMAR	L	L
10	88222281119061	SAHIL KUMAR	L	L
11	88222281119062	SAHIL KUMAR	L	L
12	88222281119063	SAHIL KUNDAL		
13	88222281119066	SMILE	<u> </u>	

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

88222281119067 | VIKAS SHARMA

Total No. Of Answer Sheets Packed >

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT 3217 / INDUSTRIAL TRAINING INSTITUTE, BAMIAL Center Name: Course: 654 / MACHINIST Class: Second 44424 / EMPLOYBILITY SKILL 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 Nov.' 2021 EXAMS -SCVT

Center Name: 3218 / INDUSTRIAL TRAINING INSTITUTE, PATHANKOT

Course: 139 / MECH. REF. & AIR CONDITIONING

44424 / EMPLOYBILITY SKILL Subject:

Class: Second

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88218280119021	JABHAY GULERIA	<u> </u>	
2	88218280119022	AMIT SINGH	<u> </u>	<u> </u>
3	88218280119023	JAMRINDER SINGH	<u> </u>	L
4	88218280119024	AVINASH	<u> </u>	L
5	88218280119025	AVINASH KUMAR	<u> </u>	<u> </u>
6	88218280119026	BHANU PARTAP SINGH	<u> </u>	<u></u>
7	88218280119028	GOURAV KUMAR	<u> </u>	<u> </u>
8	88218280119030	HARSH SALARIA	<u> </u>	L
9	88218280119031	JATIN KUMAR	<u> </u>	<u> </u>
10	88218280119033	KESHAV MANHOTRA	<u> </u>	<u> </u>
11	88218280119034	PANKAJ SINGH	<u> </u>	<u> </u>
12	88218280119035	PARAMJIT SINGH	<u> </u>	<u> </u>
13	88218280119037	SACHIN	<u> </u>	<u> </u>
14	88218280119038	SAHIL	<u> </u>	<u> </u>
15	88218280119039	SAHIL KUMAR	<u> </u>	<u> </u>
16	88218280119040	SANGRAM SINGH	<u> </u>	L
17	88218280119041	SIMRANJIT SINGH	<u></u>	
18	88218280119042	VISHAL		

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

Total No. Of Answer Sheets Packed >

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT 3218 / INDUSTRIAL TRAINING INSTITUTE, PATHANKOT Center Name: Course: 139 / MECH. REF. & AIR CONDITIONING Class: Second Subject: 44424 / EMPLOYBILITY SKILL 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

Name of the Superintendent Signature of the Superintendent

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

Name of the Deputy Controller Signature of the Deputy Controller

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

Name of the Controller Signature of the Controller

filled correctly as per instructions.

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

Center Name: 3218 / INDUSTRIAL TRAINING INSTITUTE, PATHANKOT

Course : 145 / ELECTRONICS MECHANIC Class: Second Subject : 44424 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88219280119043	_] ABHISHEK	<u> </u>	<u>L</u>
2	88219280119044	JABHISHEK KUMAR	<u> </u>	<u>L</u>
3	88219280119046	_] AKASHDEEP	<u> </u>	L
4	88219280119048	JBISHAV CHAMBYAL	<u> </u>	L
5	88219280119049	_] GITANSH	<u> </u>	L
6	88219280119050	JGOURAV	<u> </u>	L
7	88219280119051	JGOURAV	<u> </u>	L
8	88219280119052	_] KANAV	<u> </u>	L
9	88219280119053	_] KUNAL	<u> </u>	L
10	88219280119055	_J MUNISH KUMAR	<u> </u>	<u> </u>
11	88219280119056	NARESH KUMAR	<u> </u>	<u> </u>
12	88219280119058	PRINCE KUMAR	<u> </u>	<u> </u>
13	88219280119059	ROHIT SINGH	<u> </u>	<u> </u>
14	88219280119060	SHEKHER	<u> </u>	<u> </u>
15 	88219280119061	SHIVAM PATHANIA	<u> </u>	<u> </u>
16	88219280119062	SHUBHAM	<u> </u>	<u> </u>
17 	88219280119063	SHUBHAM KUMAR	<u> </u>	<u> </u>
18	88219280119064	SOURAV KUMAR	<u> </u>	<u> </u>
19	88219280119065	TARUN SINGH	<u> </u>	<u> </u>
20	88219280119066	JVISHAL MAHINIA	<u></u>	L

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT 3218 / INDUSTRIAL TRAINING INSTITUTE, PATHANKOT Center Name: Course: 145 / ELECTRONICS MECHANIC Class: Second Subject: 44424 / EMPLOYBILITY SKILL 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 Nov.' 2021 EXAMS -SCVT

3231 / INDUSTRIAL TRAINING INSTITUTE (W) GURDASPUR Center Name:

Course: 145 / ELECTRONICS MECHANIC Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88219280419001	JARTI DEVI	<u> </u>	<u> </u>
2	88219280419002	DIMPLE DEVI		L
3	88219280419003	KAJAL	<u> </u>	L
4	88219280419005	KAJAL		I
5	88219280419006	KASHMIRO DEVI		L
6	88219280419008	KOMAL SAINI		<u> </u>
7	88219280419010	MANPREET KUMARI		L
8	88219280419011	MANSAROJ		L
9	88219280419014	RIYA KHOKHAR		L
10	88219280419015	SARBJIT KAUR		<u></u>

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

Total No. Of Answer Sheets Packed >

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT 3231 / INDUSTRIAL TRAINING INSTITUTE (W) GURDASPUR Center Name: Course: 145 / ELECTRONICS MECHANIC Class: Second Subject: 44424 / EMPLOYBILITY SKILL 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 Nov.' 2021 EXAMS -SCVT

PAGE: 1 Center Name:

3234 / ITI (W) FATEHGARH CHURIAN, GURDASPUR

Course: 145 / ELECTRONICS MECHANIC

Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88219280819002	JAKASHDEEP SINGH	<u> </u>	<u></u>
2	88219280819003	JAMAN MASIH	<u> </u>	L
3	88219280819005	ANMOLDEEP SINGH	<u> </u>	L
4	88219280819007	GAURAVJIT SINGH	<u> </u>	L
5	88219280819009	HARBHAL SINGH	<u> </u>	L
6	88219280819011	HARPREET SINGH	<u> </u>	L
7	88219280819012	JASKARAN SINGH	<u> </u>	L
8	88219280819014	JASWINDER SINGH	<u> </u>	L
9	88219280819015	KARANPAL	<u> </u>	L
10	88219280819016	KARANPREET SINGH	<u> </u>	L
11	88219280819017	LOVEBIR SINGH	<u> </u>	L
12	88219280819018	LOVEPREET SINGH	<u> </u>	L
13	88219280819023	MANPREET SINGH	<u> </u>	L
14	88219280819024	SONU SHARMA		

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

Total No. Of Answer Sheets Packed >

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING
PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT
Center Name: 3234 / ITI (W) FATEHGARH CHURIAN, GURDASPUR
Course: 145 / ELECTRONICS MECHANIC Class: Second
Subject: 44424 / EMPLOYBILITY SKILL

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

Undertaking

undertaki

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 Nov.' 2021 EXAMS -SCVT

Center Name: 3315 / GOVT. I.T.I, KAPURTHALA

Course: 132 / ELECTRICIAN Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231272119001	JAJAY SINGH	<u> </u>	L
2	88231272119002	AKASHDEEP SINGH	<u> </u>	L
3	88231272119003	AKASHPREET SINGH	<u> </u>	L
4	88231272119004	JAMRITPAL SINGH	<u> </u>	L
5	88231272119006	CHARANPREET SINGH	<u> </u>	L
6	88231272119009	DINESH KUMAR		L
7	88231272119012	GURPREET SINGH	<u> </u>	L
8	88231272119013	GURPREET SINGH	<u> </u>	L
9	88231272119016	HARPREET SINGH	<u> </u>	L
10	88231272119017	HARWINDERPAL SINGH	<u> </u>	L
11	88231272119018	INDERBIR SINGH	<u> </u>	L
12	88231272119019	JAGMEET PAL SINGH	<u> </u>	L
13	88231272119021	JASKARAN SINGH	<u> </u>	L
14	88231272119023	KARANVIR SINGH	<u> </u>	L
15	88231272119024	LOVEJEET SINGH	L	L
16	88231272119025	LOVEPREET GILL	<u> </u>	L
17 	88231272119026	LOVEPREET SINGH	<u> </u>	L
18	88231272119027	JMANPREET SINGH	<u> </u>	L
19	88231272119028	_J MOHIT	<u> </u>	
20	88231272119029	J.MOHIT SINGH	L	<u></u>
21	88231272119030	PARKASH	<u> </u>	<u> </u>

PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

Center Name: 3315 / GOVT. I.T.I, KAPURTHALA

132 / ELECTRICIAN

Course : Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
22	88231272119032	PRINCE VIRK		
23	88231272119033	RAMANDEEP SINGH		
24	88231272119034	RESHAM SINGH		
25 	88231272119035	SHARNPREET SINGH		
26	88231272119036	SUCHA SINGH		
27	88231272119037	SUKHCHAIN SINGH		
28	88231272119038	SUMANJIT SINGH		
29	88231272119039	VISHAL KUMAR		
Tota	al No. Of Answer She ne and Signature Of	eets Packed >	osent:	
			Undertaki ng	
have	e examination as Invi appeared under mv su	(Designation) gilator. I have personally che pervision in today's exam, hav any mistakes are found, I will	ecked and ensured tha ve 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
	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 hav fill∈	ve conducted 10% rand ed correctly as per i	lom checking of the OMR sheet on nstructions.	of 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% ranc ed correctly as per i	lom checking of the OMR sheet on nstructions.	of the said examinati	on and found that particulars have been
Name	of the Controller		Si gna	ture of the Controller

2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

Center Name: 3333 / INDUSTRIAL TRAINING INSTITUTE (W) , PHAGWARA

Course: 654 / MACHINIST Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88222272519022	_J AMIT KUMAR	<u> </u>	
2	88222272519023	BIKRAMJIT SINGH	<u> </u>	<u> </u>
3	88222272519026	KARANPREET SINGH	<u> </u>	<u> </u>
4	88222272519027	LOVEPREET JASSI	<u> </u>	<u> </u>
5	88222272519029	_] PANKAJ	<u> </u>	<u> </u>
6	88222272519030	RISHIKESH KUMAR SUMAN	<u> </u>	<u> </u>
7	88222272519032	JSURAJ	<u> </u>	<u> </u>
8	88222272519033	TARANVIR SINGH	<u> </u>	<u> </u>
9	88222272519034	TARKESHWAR	<u> </u>	<u> </u>
10	88222272519036	TEJINDER 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 Nov.' 2021 EXAMS -SCVT 3333 / INDUSTRIAL TRAINING INSTITUTE (W), PHAGWARA Center Name: Course: 654 / MACHINIST Class: Second Subject: 44424 / EMPLOYBILITY SKILL 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 Nov.' 2021 EXAMS -SCVT

Center Name: 4211 / INDUSTRIAL TRAINING INSTITUTE, FARIDKOT

Course: 125 / WIREMAN Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88232240119065	AKASHDEEP SINGH	 	
2	88232240119066	DHALWINDER SINGH	 	
3	88232240119067	 GURKAMAL SINGH		
4	88232240119069	HARJINDER SINGH		
5	88232240119070	 JAGDEEP SINGH		
6	88232240119071	 JAGMEET SINGH		
7	88232240119072	KULDEEP SINGH		
8	88232240119074	LOVEJINDER SINGH		1
9	88232240119075	MANDEEP KAUR		1
10	88232240119076	MANINDER SINGH	<u> </u>	1
11	88232240119077	MANPREET SINGH	<u> </u>	1
12	88232240119078	RAJPREET SINGH		1
13	88232240119082	SATNAM SINGH	<u> </u>	<u> </u>
14	88232240119083	SUKHJINDER SINGH		<u></u>
15	88232240119084	SUKHRAJ 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 Nov.' 2021 EXAMS -SCVT
Center Name: 4211 / INDUSTRIAL TRAINING INSTITUTE, FARIDKOT
Course: 125 / WIREMAN Class: Second
Subject: 44424 / EMPLOYBILITY SKILL

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 Nov.' 2021 EXAMS -SCVT

Center Name: 4211 / INDUSTRIAL TRAINING INSTITUTE, FARIDKOT

Course: 132 / ELECTRICIAN Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231240119001	_] ABHISHEK	<u> </u>	
2	88231240119002	AKASHDEEP SINGH		
3	88231240119007	GURJEEVAN SINGH		
4	88231240119009	GURPREET SINGH		
5	88231240119010	JASPREET SINGH		
6	88231240119013	LOVEPREET SINGH		
7	88231240119014	PARDEEP SINGH		
8	88231240119015	ROSHAN SINGH		
9	88231240119018	SHAMINDER SINGH		
10	88231240119019	₊SIKANDFR SINGH	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 Nov.' 2021 EXAMS -SCVT 4211 / INDUSTRIAL TRAINING INSTITUTE, FARIDKOT Center Name: Course: 132 / ELECTRICIAN Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

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 Nov.' 2021 EXAMS -SCVT

Center Name: 4211 / INDUSTRIAL TRAINING INSTITUTE, FARIDKOT

Course: 143 / DRAUGHTSMAN (CIVIL) Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

PAGE: 1

10

S.No		Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1		88217240119022	JAMANDEEP SINGH	<u> </u>	
2		88217240119023	_J AMARJEET SINGH	<u> </u>	<u> </u>
3		88217240119025	ANGREJ SINGH	<u> </u>	<u> </u>
4		88217240119026	JARMAN SINGH	L	<u> </u>
5		88217240119028	_J BALTEJ SINGH	<u> </u>	<u> </u>
6		88217240119030	CHAMKAUR SINGH	<u> </u>	<u> </u>
7		88217240119031	GAGANDEEP SINGH	<u> </u>	<u> </u>
8		88217240119033	GURSIMRANJEET SINGH	<u> </u>	<u> </u>
9		88217240119035	HARPREET SINGH	<u> </u>	<u> </u>

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

88217240119038 | KULDEEP SINGH

88217240119042 | SANDEEP SINGH

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 Nov.' 2021 EXAMS -SCVT 4211 / INDUSTRIAL TRAINING INSTITUTE, FARIDKOT Center Name: Course: 143 / DRAUGHTSMAN (CIVIL) Class: Second Subject: 44424 / EMPLOYBILITY SKILL 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 Nov.' 2021 EXAMS -SCVT

Center Name: 4231 / INDUSTRIAL TRAINING INSTITUTE(W), JAITO(FARIDKOT)

Course: 139 / MECH. REF. & AIR CONDITIONING

44424 / EMPLOYBILITY SKILL

Class: Second

Subject:

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88218240319022	JAMRITPAL SINGH		<u></u>
2	88218240319023	ANMOLPREET SINGH		<u> </u>
3	88218240319024	_] ARSHDEEP		L
4	88218240319025	ARSHDEEP SINGH MAKKA		L
5	88218240319026	GURBINDER SINGH		L
6	88218240319032	JAGDEEP SINGH		<u></u>
7	88218240319033	JAGMEET SINGH		L
8	88218240319034	JASWINDER SINGH		L
9	88218240319036	LOVEPREET SINGH		L
10	88218240319037	LOVEPREET SINGH SANDE		L
11	88218240319038	RAMANDEEP SINGH		L
12	88218240319039	SAJAN KUMAR		<u></u>
13	88218240319040	SANDEEP SINGH		<u></u>
14	88218240319041	SUKHDEEP SINGH		<u></u>
15	88218240319042	SUKHPREET SINGH		<u></u>
16	88218240319043	SUKHWINDER 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

PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT 4231 / INDUSTRIAL TRAINING INSTITUTE(W), JAITO(FARIDKOT) Center Name: Course: 139 / MECH. REF. & AIR CONDITIONING Class: Second Subject: 44424 / EMPLOYBILITY SKILL 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

ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

Center Name: 4231 / INDUSTRIAL TRAINING INSTITUTE(W), JAITO(FARIDKOT)

Course: 145 / ELECTRONICS MECHANIC Class: Second

Name Of the Student

Subject: 44424 / EMPLOYBILITY SKILL

Regd. No.

PAGE: 1

S.No

		'	7 11131101 011001 1101	5
1	88219240319045	BIKRAM SINGH	 	<u></u>
2	88219240319049	GURSIMRANJEET SINGH	<u> </u>	L
3	88219240319050	JAGANPREET SINGH	<u> </u>	L
4	88219240319054	KARMJEET SINGH	<u> </u>	L
5	88219240319056	LOVEDEEP SINGH	<u> </u>	L
6	88219240319057	LOVEJEET SINGH	L	<u> </u>
7	88219240319058	LOVEPREET SINGH	L	L
8	88219240319060	RAJPREET SINGH	L	L
9	88219240319065	RUPINDER SINGH	L	<u> </u>
10	88219240319067	SANJEEV KUMAR	L	L
11 	88219240319068	SUKHWINDER SINGH	L	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 Nov.' 2021 EXAMS -SCVT 4231 / INDUSTRIAL TRAINING INSTITUTE (W), JAITO (FARIDKOT) Center Name: Course: 145 / ELECTRONICS MECHANIC Class: Second Subject: 44424 / EMPLOYBILITY SKILL 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 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT

Center Name: 4311 / INDUSTRIAL TRAINING INSTITUTE, BUDHLADA

Course: 132 / ELECTRICIAN Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231232219061	JAMRITPAL SINGH	<u> </u>	<u></u>
2	88231232219063	BABLI SINGH	<u> </u>	L
3	88231232219064	BIRBALSINGH	<u> </u>	L
4	88231232219065	GURDEEP SINGH	<u> </u>	L
5 <u> </u>	88231232219066	GURPREET SINGH	<u> </u>	L
6	88231232219067	GURWINDER SINGH	<u> </u>	L
7	88231232219068	JAGSEER SINGH		
8	88231232219069	KULDEEP SINGH	<u> </u>	L
9	88231232219070	LAKHWINDER SINGH	<u> </u>	L
10	88231232219071	MANDEEP SINGH	<u> </u>	L
11	88231232219072	MANJEET SINGH	<u> </u>	L
12	88231232219073	PARKASH SINGH	<u> </u>	<u> </u>
13	88231232219074	PRITPAL SINGH	<u> </u>	L
14	88231232219075	SANYOGDEEP SINGH	<u> </u>	L
15	88231232219076	SATNAM SINGH	<u> </u>	L
16	88231232219077	SHANI SINGH		
17	88231232219078	 SUKHVIR 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 >>

Signature Of Invigilator

Name Of Invigilator

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT 4311 / INDUSTRIAL TRAINING INSTITUTE, BUDHLADA Center Name: Course: 132 / ELECTRICIAN

Subject: 44424 / EMPLOYBILITY SKILL

Class: Second

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 Nov.' 2021 EXAMS -SCVT

Center Name: 4311 / INDUSTRIAL TRAINING INSTITUTE, BUDHLADA

Course: 654 / MACHINIST Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

PAGE: 1

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

1	88222232219041	AMRIT PAL SINGH		
2	88222232219042	DALJEET SINGH		
3	88222232219044	GURPREET SINGH		
4	88222232219045	GURSEWAK SINGH		
5	88222232219046	HARDEEP SINGH		
6	88222232219048	HARPREET SINGH	·································	
7	88222232219049	HARPREET SINGH	·································	
8	88222232219050	JASPREET SINGH	·································	
9	88222232219051	LAKHWINDER SINGH	·································	
10	88222232219052	NIRMAL SINGH	·································	
11	88222232219053	RAJDEEP SINGH	·································	
12	88222232219054	RANJEET SINGH	·································	
13	88222232219055	RANVEER SINGH		
14	88222232219057	SATPAL SINGH		
15	88222232219058	SUKHVEER SINGH		

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

88222232219060 | SURNIDER SINGH

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

16

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT 4311 / INDUSTRIAL TRAINING INSTITUTE, BUDHLADA Center Name: Course: 654 / MACHINIST Class: Second

44424 / EMPLOYBILITY SKILL 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 Nov.' 2021 EXAMS -SCVT

Center Name: 4412 / INDUSTRIAL TRAINING INSTITUTE, FEROZEPUR

Course: 132 / ELECTRICIAN Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231241119001	JAMAN KUMAR		L
2	88231241119002	APINDER SINGH	<u> </u>	L
3	88231241119003	GURDITA SINGH	<u> </u>	L
4	88231241119004	GURPREET SINGH	<u> </u>	L
5	88231241119005	GURWINDER SINGH	<u> </u>	L
6	88231241119006	HARPREET SINGH	<u> </u>	L
7	88231241119008	JOBANPREET SINGH	<u> </u>	L
8	88231241119009	KARAN KUMAR	<u> </u>	L
9	88231241119013	MANGAL SINGH	<u> </u>	L
10	88231241119016	PARAMJEET KAUR	<u> </u>	L
11	88231241119017	SARBJIT KAUR	<u> </u>	L
12	88231241119018	SATNAM SINGH	<u> </u>	L
13	88231241119020	SHINDERPAL 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 Nov.' 2021 EXAMS -SCVT 4412 / INDUSTRIAL TRAINING INSTITUTE, FEROZEPUR Center Name: Course: 132 / ELECTRICIAN Class: Second Subject: 44424 / EMPLOYBILITY SKILL

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 Nov.' 2021 EXAMS -SCVT

4412 / INDUSTRIAL TRAINING INSTITUTE, FEROZEPUR

Course: 139 / MECH. REF. & AIR CONDITIONING

Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

Center Name:

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88218241119023	ANMOL	<u> </u>	L
2	88218241119024	ANSHUL	<u> </u>	L
3	88218241119025	ARSH SHARMA	<u> </u>	L
4	88218241119026	AVINASHDEEP SINGH	<u> </u>	L
5	88218241119027	JBEANT SINGH	L	L
6	88218241119029	JGURJANT SINGH	L	L
7	88218241119030	GURPREET SINGH	L	L
8	88218241119031	HARJINDER SINGH	L	L
9	88218241119032	JAGJEET SINGH	L	L
10	88218241119033	JAI KAPOOR	L	L
11	88218241119034	JASWANT SINGH	L	L
12	88218241119036	_] KAMALKANT	L	L
13	88218241119037	_J KARAN	L	L
14	88218241119039	JPAWANDEEP SINGH	L	L
15 	88218241119040	_J RAHUL VERMA	L	L
16 	88218241119041	RAJPREET SINGH	<u> </u>	L
17 	88218241119042	SUCHA SINGH	<u> </u>	L
18	88218241119043	SUKHJINDER SINGH	<u> </u>	L
19	88218241119044	TUSHAR	<u> </u>	<u> </u>

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT Center Name: 4412 / INDUSTRIAL TRAINING INSTITUTE, FEROZEPUR Course: 139 / MECH. REF. & AIR CONDITIONING Class: Second Subject: 44424 / EMPLOYBILITY SKILL 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 Nov.' 2021 EXAMS -SCVT

Center Name: 4414 / INDUSTRIAL TRAINING INSTITUTE, JALALABAD

Course: 128 / FITTER Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88227242219001	BALDEV SINGH		
2	88227242219003	GURJANT SINGH	- -	l
3	88227242219004	GURPREET SINGH		
4	88227242219005	GURWINDER SINGH		 [
5	88227242219006	HARJEET SINGH		 [
6	88227242219007	HARMESH SINGH		 [
7	88227242219008	HARPREET SINGH		L
8	88227242219010	JAGSEER SINGH		L
9	88227242219011	Jaswinder Singh		L
10	88227242219012	KANTA RANI		L
11	88227242219013	KORRO RANI		L
12	88227242219014	Lakhwinder Singh		L
13	88227242219015	PARVEEN KAUR		L
14	88227242219016	_] RAJA		L
15	88227242219017	RAMANDEEP KAUR		<u> </u>

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

88227242219019 | SURINDER SINGH

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

16

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR Nov.' 2021 EXAMS -SCVT Center Name: 4414 / INDUSTRIAL TRAINING INSTITUTE, JALALABAD Class: Second

Subject: 44424 / EMPLOYBILITY SKILL

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