2 ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT

Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course: 114 / PLUMBER Class: First

Subject: 44431 / TRADE THEORY

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88209171723014	DILPREET SINGH	<u> </u>	L
2	88209174324001	AMANDEEP SINGH	<u> </u>	L
3	88209174324003	CHARAN KAWAL	<u> </u>	L
4	88209174324005	HARJOT SINGH	<u> </u>	L
5 l	88209174324006	HARJOT SINGH	<u> </u>	L
6	88209174324008	HARPREET SINGH	<u> </u>	L
7 l	88209174324009	HARWINDER JAKHU	<u> </u>	L
8	88209174324011	JASMEET SINGH BHATTI	<u> </u>	L
9	88209174324012	KHUSHWANT NAR	<u> </u>	L
10 	88209174324013	LOVEDEEP RAI RATTU	<u> </u>	L
11 	88209174324017	<sub> </sub> MANVIR SINGH	<u> </u>	L
12	88209174324020	ROHIT KUMAR	<u> </u>	L
13	88209174324021	SARIFUL		L
14	88209174324022	SATWINDER	<u> </u>	
15	88209174324023	TARUN		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 August' 2025 EXAMS -SCVT

5580 / GOVT. ITI ADAMPUR, JALANDHAR Center Name:

Course: 114 / PLUMBER Class: First

Subject: 44431 / TRADE THEORY

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

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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 August' 2025 EXAMS -SCVT

PAGE: 1 Center Name:

Regd. No.

S.No

5580 / GOVT. ITI ADAMPUR, JALANDHAR

Subject: 44434 / EMPLOYBILITY SKILL

Course: 114 / PLUMBER Class: First

Name Of the Student

0.110		, manie et alle etadent	Answer Sheet No.	
1	88209174324001	<sub> </sub> AMANDEEP SINGH		
2	88209174324003	CHARAN KAWAL	<u>[</u>	
3	88209174324005	HARJOT SINGH	<u> </u>	
4	88209174324006	HARJOT SINGH	<u> </u>	<u> </u>
5	88209174324008	HARPREET SINGH	<u> </u>	
6	88209174324009	HARWINDER JAKHU	<u> </u>	
7	88209174324011	JASMEET SINGH BHATTI	<u> </u>	
8	88209174324012	KHUSHWANT NAR	<u> </u>	
9	88209174324013	LOVEDEEP RAI RATTU	<u> </u>	<u> </u>
10	88209174324017	<sub>J</sub> MANVIR SINGH		
11	88209174324020	ROHIT KUMAR		
12	88209174324021	SARIFUL	<u> </u>	<u> </u>
13	88209174324022	SATWINDER		
14	88209174324023	<sub> </sub> TARUN	<u> </u>	L

Answer Sheet No.

Student's Sign.

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

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT

Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course: 114 / PLUMBER Class: First

Subject: 44434 / EMPLOYBILITY SKILL

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Name of the Superintendent

Signature of the Superintendent

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Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

2 ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT

Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course: 114 / PLUMBER Class: First

Subject: 44435 / PRACTICAL

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88209174324001	JAMANDEEP SINGH	<u> </u>	
2	88209174324003	CHARAN KAWAL	L	L
3	88209174324005	HARJOT SINGH	<u> </u>	
4	88209174324006	HARJOT SINGH	<u> </u>	
5 	88209174324008	HARPREET SINGH	<u> </u>	
6	88209174324009	HARWINDER JAKHU	<u> </u>	
7	88209174324011	JASMEET SINGH BHATTI	<u> </u>	
8	88209174324012	KHUSHWANT NAR	<u> </u>	
9	88209174324013	LOVEDEEP RAI RATTU	<u> </u>	
10 <sub> </sub>	88209174324017	<sub>J</sub> MANVIR SINGH	<u> </u>	
11 	88209174324020	ROHIT KUMAR	<u> </u>	
12	88209174324021	SARIFUL		
13	88209174324022	SATWINDER	<u> </u>	
14	88209174324023	<sub> </sub> TARUN	<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 August' 2025 EXAMS -SCVT 5580 / GOVT. ITI ADAMPUR, JALANDHAR Center Name:

Course: 114 / PLUMBER Class: First

44435 / PRACTICAL Subject:

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

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

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Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR Course : 119 / CARPENTER Class: First 44412 / WORKSHOP CALCULATIONS AND SCIENCE Subject: Name Of the Student S.No Student's Sign. Regd. No. Answer Sheet No. 88206171120181 | KULVEER Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)\_\_\_\_\_\_ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller Signature of the Deputy Controller

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

Name of the Controller Signature of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

of 1 ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT

Center Name: 5580 / C

PAGE: 1

5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course: 119 / CARPENTER Class: First

Subject: 44413 / ENGINEERING DRAWING

filled correctly as per instructions.

Name of the Controller

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88206171120181 | KULVEER Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)\_\_\_\_\_\_ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Deputy Controller Signature of the Deputy Controller

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

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT

Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course: 119 / CARPENTER Class: First

Subject: 44431 / TRADE THEORY

Name Of the Student S.No Student's Sign. Regd. No. Answer Sheet No. 88206171121013 | VISHAL Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)\_\_\_\_\_\_ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions. Name of the Superintendent Signature of the Superintendent I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

1 ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT

Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course: 119 / CARPENTER Class: First

Subject: 44434 / EMPLOYBILITY SKILL

PAGE: 1

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

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

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Name of the Superintendent

Signature of the Superintendent

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Name of the Deputy Controller

Signature of the Deputy Controller

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Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING

1 ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT

Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course: 119 / CARPENTER Class: First

Subject: 44435 / PRACTICAL

Name and Signature Of Incharge

PAGE: 1

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Name of the Controller

2 ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT

Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course: 128 / FITTER Class: First

Subject: 44431 / TRADE THEORY

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88227274324025	AMARJIT KUMAR RAI	<u> </u>	L
2	88227274324026	ANIL BABU		L
3	88227274324030	CHANDER PAL		<u> </u>
4	88227274324031	GURPREET LAL		 
5	88227274324033	  JATIN KUMAR		 
6	88227274324034	<sub> </sub> PARAMJIT KUMAR		 
7	88227274324035	<sub> </sub> PARAMVIR SINGH		 
8	88227274324036	  SAHIL BHATTI		 
9	88227274324037	  SANDEEP RAI		 
10	88227274324040	'  SAURAV KUMAR		 
11	88227274324041	<sub> </sub> SHUBHAM KUMAR	- <del></del>	
12	88227274324042	  TAJVIR		<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 August' 2025 EXAMS -SCVT 5580 / GOVT. ITI ADAMPUR, JALANDHAR Center Name:

Course: 128 / FITTER Class: First

Subject: 44431 / TRADE THEORY

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

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Name of the Controller

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT

Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course: 128 / FITTER Class: First

Subject: 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88227274324025	AMARJIT KUMAR RAI		
2	88227274324026	ANIL BABU	<u> </u>	<u> </u>
3	88227274324030	CHANDER PAL	L	L
4	88227274324031	GURPREET LAL	L	L
5 	88227274324033	JATIN KUMAR	L	L
6	88227274324034	PARAMJIT KUMAR	L	L
7	88227274324035	PARAMVIR SINGH	L	L
8	88227274324036	SAHIL BHATTI	L	L
9	88227274324037	SANDEEP RAI	L	L
10	88227274324040	SAURAV KUMAR	L	L
11 	88227274324041	SHUBHAM KUMAR	L	L
12	88227274324042	TAJVIR	<u> </u>	<u> </u>

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PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT

5580 / GOVT. ITI ADAMPUR, JALANDHAR Center Name:

Course: 128 / FITTER Class: First

44434 / EMPLOYBILITY SKILL Subject:

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Name of the Controller

2 ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT

Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course: 128 / FITTER Class: First

Subject: 44435 / PRACTICAL

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88227274323012	NEERAJ KUMAR JHAMAT	<u> </u>	<u></u>
2	88227274323014	SUMIT KUMAR	<u> </u>	L
3	88227274324025	AMARJIT KUMAR RAI	<u> </u>	L
4	88227274324026	ANIL BABU	<u> </u>	L
5 	88227274324030	CHANDER PAL	<u> </u>	L
6 <u> </u>	88227274324031	GURPREET LAL	<u> </u>	L
7	88227274324033	JATIN KUMAR	<u> </u>	L
8	88227274324034	PARAMJIT KUMAR	<u> </u>	L
9	88227274324035	PARAMVIR SINGH	<u> </u>	L
10	88227274324036	SAHIL BHATTI	<u> </u>	L
11	88227274324037	SANDEEP RAI	<u> </u>	L
12 	88227274324040	SAURAV KUMAR		L
13	88227274324041	SHUBHAM KUMAR	<u></u>	 L
14	88227274324042	<sub> </sub> TAJVIR	<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 August' 2025 EXAMS -SCVT

Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course: 128 / FITTER Class: First

Subject: 44435 / PRACTICAL

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

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

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Name of the Superintendent

Signature of the Superintendent

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Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT

5580 / GOVT. ITI ADAMPUR, JALANDHAR Center Name:

Course: 128 / FITTER Class: Second

Subject: 44441 / TRADE THEORY

Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.			
88227274323001	<sub> </sub> ABHAY KUMAR					
88227274323004	GURWINDER SINGH	<u> </u>	<u>L</u>			
88227274323006	HARSHPREET SINGH	<u> </u>	<u>L</u>			
88227274323010	MANISH KUMAR	<u> </u>	<u>L</u>			
88227274323011	MANVIR SINGH	<u> </u>	<u>L</u>			
88227274323012	NEERAJ KUMAR JHAMAT		L			
88227274323013	RANJIT	<u> </u>	L			
88227274323014	SUMIT KUMAR	<u> </u>	L			
88227274323015	SURAJ KUMAR		<u> </u>			
Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge						
		Undertaki ng				
Name)						
ove examination as Invi re appeared under my su reby undertake that if	(Designation) gilator. I have personally check upervision in today's exam, have any mistakes are found, I will	hked and ensured that been filled and sha not be entitled for	ereby certify that I have conducted the particulars of all the students who ded correctly in the OMR sheets. I also any remuneration.			
ove examination as Invi re appeared under my su reby undertake that if	(Designation)_ gilator. I have personally chec upervision in today's exam, have any mistakes are found, I will	not be entitled for	ereby certify that I have conducted the particulars of all the students who ded correctly in the OMR sheets. I also any remuneration.  ure of the Invigilator			
eby undertake that if	dom checking of the OMR sheet of	not be entitled for Signat	any remuneration.			
ave conducted 20% rand	dom checking of the OMR sheet of nstructions.	Signat	ure of the Invigilator			
ave conducted 20% rand led correctly as per i	dom checking of the OMR sheet of nstructions.	Signat the said examinatio	any remuneration. ure of the Invigilator n and found that particulars have been			
ave conducted 20% rand led correctly as per i me of the Superintender have conducted 10% rand	dom checking of the OMR sheet of nstructions.  It dom checking of the OMR sheet of nstructions.	Signat the said examinatio Signat the said examinatio	ure of the Invigilator  n and found that particulars have been  ure of the Superintendent			
ave conducted 20% rand led correctly as per i me of the Superintender have conducted 10% rand led correctly as per i me of the Deputy Contro	dom checking of the OMR sheet of nstructions.  It dom checking of the OMR sheet of nstructions.  Older dom checking of the OMR sheet of nstructions.	Signat  the said examinatio  Signat  Signat  the said examinatio	ure of the Invigilator  n and found that particulars have been  ure of the Superintendent  n and found that particulars have been			
)	88227274323004 88227274323006 88227274323010 88227274323011 88227274323012 88227274323013 88227274323014 88227274323015 stal No. Of Students in stal No. Of Answer Sheet	,	88227274323004   GURWINDER SINGH   88227274323006   HARSHPREET SINGH   88227274323010   MANISH KUMAR   88227274323011   MANVIR SINGH   88227274323012   NEERAJ KUMAR JHAMAT   88227274323013   RANJIT   88227274323014   SUMIT KUMAR   88227274323015   SURAJ KUMAR   188227274323015   SURA			

Class: Second

1 ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT

PAGE: 1 of 1 Center Name:

5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course: 128 / FITTER

128 / FITTER

Subject: 44444 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88227274323001	JABHAY KUMAR	<u> </u>	<u> </u>
2	88227274323004	GURWINDER SINGH	L	<u></u>
3	88227274323006	HARSHPREET SINGH	L	L
4	88227274323010	MANISH KUMAR	L	L
5	88227274323011	MANVIR SINGH	L	<u>L</u>
6	88227274323012	NEERAJ KUMAR JHAMAT	L	<u> </u>
7	88227274323013	RANJIT	<u> </u>	<u>L</u>
8	88227274323014	SUMIT KUMAR	<u> </u>	<u>L</u>
9	88227274323015	SURAJ KUMAR		1
Tot	al No. Of Students in al No. Of Answer She me and Signature Of		ent:	
			Undertaki ng	
I (N abov have here	ame) e examination as Invi appeared under my su by undertake that if	(Designation) gilator. I have personally chec upervision in today's exam, have any mistakes are found, I will	h ked and ensured that been filled and sha not be entitled for	ereby certify that I have conducted the particulars of all the students who ded correctly in the OMR sheets. I also any remuneration.
			Si gnat	ure of the Invigilator
	ve conducted 20% rand ed correctly as per i		the said examinatio	n and found that particulars have been
Name	of the Superintender	nt	Si gnat	ure of the Superintendent
	ve conducted 10% rand ed correctly as per i		the said examinatio	n and found that particulars have been
Name	of the Deputy Contro	oller	Si gnat	ure of the Deputy Controller
l h fill	ave conducted 5% rand ed correctly as per i	dom checking of the OMR sheet of nstructions.	the said examinatio	n and found that particulars have been
Name	of the Controller		Si gnat	ure of the Controller

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT

5580 / GOVT. ITI ADAMPUR, JALANDHAR Center Name:

Course: 128 / FITTER Class: Second

Subject: 44445 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign. 
1	88227274323001	ABHAY KUMAR	<u> </u>	
2	88227274323004	GURWINDER SINGH	<u> </u>	<u> </u>
3	88227274323006	HARSHPREET SINGH	<u> </u>	
4	88227274323010	MANISH KUMAR	<u> </u>	
5	88227274323011	MANVIR SINGH	<u> </u>	
6	88227274323012	NEERAJ KUMAR JHAMAT	<u> </u>	
7	88227274323013	RANJIT	<u> </u>	
8	88227274323014	SUMIT KUMAR	<u> </u>	<u> </u>
9	88227274323015	SURAJ KUMAR		1
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	ame)_ e examination as Invi appeared under my su by undertake that if	(Designation) gilator. I have personally chec upervision in today's exam, have any mistakes are found, I will	ked and ensured that been filled and sha not be entitled for	nereby certify that I have conducted the particulars of all the students who added correctly in the OMR sheets. I also any remuneration.
			Si gnat	cure 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 gnat	ture 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	ller	Si gnat	cure of the Deputy Controller
l h	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

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT

Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course: 132 / ELECTRICIAN Class: First

Subject: 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231271321012	MANISH CHOUDHARY	<u> </u>	<u> </u>
2	88231271321017	RAMAN KUMAR	<u> </u>	<u> </u>
3	88231274324045	JADITYA KUMAR GUPTA		<u> </u>
4	88231274324046	ASPREET		<u> </u>
5	88231274324047	<sub> </sub> BALJIT KUMAR	<u> </u>	<u> </u>
6	88231274324048	BALWINDER SINGH	<u> </u>	<u> </u>
7	88231274324049	HARJOT	<u> </u>	<u> </u>
8	88231274324052	MANPREET SINGH	<u> </u>	<u> </u>
9	88231274324053	<sub>J</sub> MANVIR VIRDI	<u> </u>	<u> </u>
10	88231274324054	<sub>]</sub> MOHIT	<u> </u>	<u> </u>
11 	88231274324055	NAVJEET SINGH	<u> </u>	<u> </u>
12	88231274324056	<sub>]</sub> RAHUL	<u> </u>	<u> </u>
13	88231274324057	RAVI BAINS	<u> </u>	<u>L</u>
14	88231274324058	RITIK KUMAR	<u> </u>	<u> </u>
15	88231274324059	SAGAR	<u> </u>	<u> </u>
16	88231274324060	<sub>]</sub> SAHIL	<u> </u>	<u> </u>
17	88231274324061	SANTOKH SINGH	<u> </u>	<u> </u>
18	88231274324062	SUKHMINDER		<u> </u>
19	88231274324063	SUNIL KUMAR	<u></u>	
20	88231274324064	JVIJAY KUMAR		

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT 5580 / GOVT. ITI ADAMPUR, JALANDHAR Center Name: Course: 132 / ELECTRICIAN Class: First Subject: 44431 / TRADE THEORY Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) \_\_\_\_\_ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration. Signature of the Invigilator I have conducted 20% random checking of the OMR 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 August' 2025 EXAMS -SCVT

Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course: 132 / ELECTRICIAN Class: First

Subject: 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231271321017	RAMAN KUMAR	<u> </u>	L
2	88231274324045	<sub> </sub> ADITYA KUMAR GUPTA	<u> </u>	L
3	88231274324046	ASPREET	<u> </u>	L
4	88231274324047	BALJIT KUMAR	<u> </u>	L
5	88231274324048	BALWINDER SINGH	<u> </u>	L
6	88231274324049	<sub> </sub> HARJOT	<u> </u>	L
7	88231274324052	MANPREET SINGH	<u> </u>	L
8	88231274324053	<sub>J</sub> MANVIR VIRDI	<u> </u>	L
9	88231274324054	<sub>Ј</sub> МОНІТ		L
10 <sub> </sub>	88231274324055	<sub> </sub> NAVJEET SINGH		L
11 _	88231274324056	<sub> </sub> RAHUL		L
12	88231274324057	RAVI BAINS		L
13	88231274324058	RITIK KUMAR		L
14	88231274324059	SAGAR		
15	88231274324060	SAHIL		
16	88231274324061	SANTOKH SINGH		
17	88231274324062	SUKHMINDER		
18	88231274324063	SUNIL KUMAR		
19	88231274324064	VIJAY KUMAR		

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING
PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT
Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR
Course: 132 / ELECTRICIAN Class: First
Subject: 44434 / EMPLOYBILITY SKILL

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

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random 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 August' 2025 EXAMS -SCVT

5580 / GOVT. ITI ADAMPUR, JALANDHAR Center Name:

Course: 132 / ELECTRICIAN Class: First

Subject: 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231274323016	JAJAY KUMAR	<u> </u>	
2	88231274324045	JADITYA KUMAR GUPTA	L	
3	88231274324046	ASPREET	L	L
4	88231274324047	BALJIT KUMAR	L	L
5	88231274324048	BALWINDER SINGH	L	L
6	88231274324049	HARJOT	L	<u></u>
7	88231274324052	MANPREET SINGH	<u> </u>	L
8	88231274324053	MANVIR VIRDI	<u> </u>	L
9	88231274324054	<sub>]</sub> MOHIT	<u> </u>	L
10	88231274324055	NAVJEET SINGH	<u> </u>	<u> </u>
11	88231274324056	<sub> </sub> RAHUL	<u> </u>	<u> </u>
12	88231274324057	RAVI BAINS	<u> </u>	<u> </u>
13	88231274324058	RITIK KUMAR	<u> </u>	<u> </u>
14	88231274324059	SAGAR	<u> </u>	<u> </u>
15 	88231274324060	SAHIL	<u> </u>	<u></u>
16	88231274324061	SANTOKH SINGH	<u> </u>	
17	88231274324062	SUKHMINDER	<u> </u>	<u> </u>
18	88231274324063	SUNIL KUMAR	<u> </u>	
19	88231274324064	VIJAY KUMAR		

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING
PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT
Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR
Course: 132 / ELECTRICIAN Class: First
Subject: 44435 / PRACTICAL

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

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

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random 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 August' 2025 EXAMS -SCVT

Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course: 132 / ELECTRICIAN Class: Second

Subject: 44441 / TRADE THEORY

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	8823127432301	6 <sub>J</sub> AJAY KUMAR		
2	8823127432301	<sup>8</sup> BHAI TOOFAN SINGH		1
3	8823127432302	<sup>20</sup> GAGANDEEP SINGH		
4	8823127432302	<sup>22</sup>  GURJOT SINGH		
5	8823127432302	<sup>23</sup> HARDEEP SINGH		
6	8823127432302	P5 HARPREET SINGH		
7	8823127432302	<sup>27</sup> LOVEPREET		
8	8823127432302	<sup>28</sup> JMANPREET KUMAR		
9	8823127432303	<sup>32</sup>  SHIV KUMAR		
10	8823127432303	33 <sub> </sub> SURAJ KUMAR		

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

Name and Signature Of Incharge

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT 5580 / GOVT. ITI ADAMPUR, JALANDHAR Center Name: Class: Second

Course: 132 / ELECTRICIAN

Subject: 44441 / TRADE THEORY

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

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

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

2 ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT

Center Name : 5580 / GOVT. ITI ADAMPUR, JALANDHAR

PAGE: 1

Course: 132 / ELECTRICIAN Class: Second

Subject: 44444 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88231274323016	JAJAY KUMAR	<u></u>	<u></u>
2	88231274323018	BHAI TOOFAN SINGH	<u> </u>	<u> </u>
3	88231274323020	GAGANDEEP SINGH	<u> </u>	<u>L</u>
4	88231274323022	GURJOT SINGH	<u> </u>	<u>L</u>
5	88231274323023	HARDEEP SINGH	<u> </u>	<u>L</u>
6	88231274323025	HARPREET SINGH	<u> </u>	<u>L</u>
7	88231274323027	LOVEPREET	<u> </u>	<u>L</u>
8	88231274323028	JMANPREET KUMAR	<u> </u>	<u>L</u>
9	88231274323032	SHIV KUMAR	<u> </u>	L

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

88231274323033 | SURAJ KUMAR

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 August' 2025 EXAMS -SCVT

Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course: 132 / ELECTRICIAN Class: Second

Subject: 44444 / EMPLOYBILITY SKILL

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

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

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random 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 August' 2025 EXAMS -SCVT

Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course: 132 / ELECTRICIAN Class: Second

Subject: 44445 / PRACTICAL

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	8823127432301	6 <sub> </sub> AJAY KUMAR		
2	8823127432301	<sup>8</sup> BHAI TOOFAN SINGH		
3	8823127432302	<sup>0</sup>  GAGANDEEP SINGH		
4	8823127432302	<sup>2</sup>  GURJOT SINGH		
5 	8823127432302	<sup>3</sup>   HARDEEP SINGH		
6	8823127432302	<sup>5</sup>   HARPREET SINGH		
7	8823127432302	<sup>7</sup> LOVEPREET		
8	8823127432302	8 <sub> </sub> MANPREET KUMAR		
9	8823127432303	<sup>2</sup>  SHIV KUMAR		
10 <sub> </sub>	8823127432303	3 <sub> </sub> SURAJ KUMAR	I	I

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

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

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

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT

Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course: 132 / ELECTRICIAN Class: Second

Subject: 44445 / PRACTICAL

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

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

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

Class: First

ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT

PAGE: 1 of 1 Center Name:

5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course: 222 / COMP. OP. PROGRAM. ASSISTANT

Subject: 44431 / TRADE THEORY

S.N	o   Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.		
1	88242171722051	BAVNEET KAUR				
2	88242171722055	DEEDAK CADOVA				
3	88242171723081					
4	88242171723090			L		
Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge						
			Undertaki ng			
n	I (Name) hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.					
			Si gnat	ure of the Invigilator		
I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.						
N	ame of the Superintenden	it	Si gnat	ure of the Superintendent		
l f	I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.					
N	ame of the Deputy Contro	ller	Si gnat	ure of the Deputy Controller		
f	I have conducted 5% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.					
N	ame of the Controller		Si gnat	ure of the Controller		

Class: First

Signature of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT

PAGE: 1 of Center Name:

5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course :

222 / COMP. OP. PROGRAM. ASSISTANT

44435 / PRACTICAL Subject:

Name of the Controller

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88242171721069 | MANJINDER SINGH 88242171723086 | RINCLE 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 filled correctly as per instructions.

1 ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT

Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course: 654 / MACHINIST Class: First

Subject: 44431 / TRADE THEORY

PAGE: 1

Name Of the Student S.No Regd. No. Student's Sign. Answer Sheet No. 88222274324065 <sub>|</sub> AJAY KUMAR 88222274324071 | HARMESH KUMAR 2 3 88222274324074 | KULDEEP KUMAR 88222274324076 | LOVEPREET SINGH 5 88222274324078 | MANOHAR KUMAR 88222274324081 | ONKAR SINGH 88222274324082 | RANVIR 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

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT

Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course: 654 / MACHINIST Class: First

Subject: 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.		
1	88222274324065	AJAY KUMAR				
2	88222274324071	HARMESH KUMAR	<u> </u>			
3	88222274324074	KULDEEP KUMAR	<u> </u>			
4	88222274324076	LOVEPREET SINGH	<u> </u>			
5	88222274324078	MANOHAR KUMAR	<u> </u>			
6	88222274324081	ONKAR SINGH	<u> </u>			
7	88222274324082	RANVIR SINGH				
Tot	Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge					
			Undertaki ng			
I (Name) hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.						
Signature of the Invigilator				ture of the Invigilator		
I have conducted 20% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.						
Name	of the Superintenden	t	Si gna	ture of the Superintendent		
I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.						
Name	of the Deputy Contro	ller	Si gna	ture of the Deputy Controller		
l h fill	ave conducted 5% rand ed correctly as per i	om checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been		
Name	of the Controller		Si gna	ture of the Controller		

Answer Sheet No.

Student's Sign.

ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT

PAGE: 1 of 1 5580 / GOVT. ITI ADAMPUR, JALANDHAR Center Name:

Course: 654 / MACHINIST Class: First

Name Of the Student

Subject: 44435 / PRACTICAL

Regd. No.

S.No

			'	
1	88222274324065	AJAY KUMAR	1	
2	88222274324071	HADMESH KIIMAD		<u></u>
3	88222274324074	KULDEEP KUMAR		<u> </u>
4	88222274324076	LOVEPREET SINGH	<u></u>	<u> </u>
5	88222274324078	MANOHAR KUMAR	1	<u> </u>
6	88222274324081	ONKAR SINGH	<u></u>	<u> </u>
7	88222274324082	RANVIR SINGH	I	L
-	otal No. Of Answer She lame and Signature Of		Undortaki na	
			Undertaki ng	
I ab ha he	(Name)ove examination as Invive appeared under my sureby undertake that if	(Designation) gilator. I have personally chec pervision in today's exam, have any mistakes are found, I will	h  cked and ensured that been filled and sha not be entitled for	ereby certify that I have conducted the particulars of all the students who ded correctly in the OMR sheets. I also any remuneration.
			Si gnat	ure of the Invigilator
l fi	have conducted 20% rand lled correctly as per i	om checking of the OMR sheet of nstructions.	the said examinatio	n and found that particulars have been
Nai	me of the Superintenden	t	Si gnat	ure of the Superintendent
l fi	have conducted 10% rand lled correctly as per i	om checking of the OMR sheet of nstructions.	the said examinatio	n and found that particulars have been
Nai	me of the Deputy Contro	ller	Si gnat	ure of the Deputy Controller
	have conducted 5% rand lled correctly as per i		the said examinatio	n and found that particulars have been
Nai	me of the Controller		Si gnat	ure of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT

Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course: 658 / SEWING TECHNOLOGY

Class: First

Subject: 44431 / TRADE THEORY

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88247174324083	JALISHA		<u> </u>
2	88247174324084	ARSHANJIT KAUR		L
3	88247174324087	GURSIMRAN KAUR		L
4	88247174324088	HARPREET KAUR		I
5	88247174324089	HARPREET KAUR		 
6	88247174324090	HARPREET KAUR		 
7	88247174324092	MANISHA KUMARI		L
8	88247174324094	NISHA		L
9	88247174324095	PALAK		 
10	88247174324097	SAMNEET KAUR		
11	88247174324098	SANJANA MANAK		 
12	88247174324099	SANJNA DEVI		

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 August' 2025 EXAMS -SCVT 5580 / GOVT. ITI ADAMPUR, JALANDHAR Center Name:

Course: 658 / SEWING TECHNOLOGY Class: First

Subject: 44431 / TRADE THEORY

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

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

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random 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 August' 2025 EXAMS -SCVT

Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course: 658 / SEWING TECHNOLOGY

Subject: 44434 / EMPLOYBILITY SKILL

PAGE: 1

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

Class: First

1	88247174324083	ALISHA	 L
2	88247174324084	ARSHANJIT KAUR	 L
3	88247174324087	GURSIMRAN KAUR	 L
4	88247174324088	HARPREET KAUR	 L
5	88247174324089	HARPREET KAUR	
6	88247174324090	HARPREET KAUR	
7	88247174324092	MANISHA KUMARI	
8	88247174324094	NISHA	L
9	88247174324095	PALAK	
10	88247174324097	SAMNEET KAUR	 
11	88247174324098	SANJANA MANAK	
12	88247174324099	SANJNA DEVI	 

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 August' 2025 EXAMS -SCVT

Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course: 658 / SEWING TECHNOLOGY Class: First

44434 / 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

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT

Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course: 658 / SEWING TECHNOLOGY

Class: First

Name Of the Student

Subject: 44435 / PRACTICAL

Regd. No.

S.No

		'	Answer Sheet No.	
1	88247174324083	<sub> </sub> ALISHA		
2	88247174324084	ARSHANJIT KAUR	L	L
3	88247174324087	GURSIMRAN KAUR	L	L
4	88247174324088	HARPREET KAUR	L	L
5 	88247174324089	HARPREET KAUR	L	L
6	88247174324090	HARPREET KAUR	<u> </u>	L
7	88247174324092	MANISHA KUMARI	<u> </u>	L
8	88247174324094	NISHA	<u> </u>	L
9	88247174324095	PALAK	L	L
10	88247174324097	SAMNEET KAUR	L	L
11	88247174324098	JSANJANA MANAK	L	L
12	88247174324099	JSANJNA DEVI	L	L

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 August' 2025 EXAMS -SCVT

Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course: 658 / SEWING TECHNOLOGY Class: First

Subject: 44435 / PRACTICAL

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

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

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT 5580 / GOVT. ITI ADAMPUR, JALANDHAR Center Name: Course : 660 / WELDER Class: First 44431 / TRADE THEORY Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88212171723098 | AKASH KUMAR Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name) \_\_\_\_\_ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

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

Name of the Superintendent

Signature of the Superintendent

Signature of the Invigilator

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

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random 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 August' 2025 EXAMS -SCVT

5580 / GOVT. ITI ADAMPUR, JALANDHAR Center Name:

Course: 662 / REFRIGERATION & AIR CONDITIONING TECHNICIAN

Class: First

Subject: 44431 / TRADE THEORY

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88218274324103	JAMIT KUMAR	<u> </u>	L
2	88218274324104	ARSHDEEP SINGH	<u> </u>	L
3	88218274324105	CHIRAG MALHOTRA	<u> </u>	<u> </u>
4	88218274324106	J DAMAN KUMAR	<u> </u>	<u> </u>
5	88218274324109	JAPNEET SINGH	<u> </u>	<u> </u>
6	88218274324111	<sub> </sub> KESHAV	<u> </u>	<u> </u>
7	88218274324112	KHUSHAL HEER	<u> </u>	<u> </u>
8	88218274324113	<sub> </sub> KHUSHPAL	<u> </u>	<u> </u>
9	88218274324116	<sub> </sub> MOHJEET SINGH	<u> </u>	<u> </u>
10	88218274324118	<sub> </sub> RAJAT SIDHU	<u> </u>	L
11	88218274324119	ROHIT KUMAR	<u> </u>	L
12	88218274324120	SACHIN MAHI	<u> </u>	L
13	88218274324121	<sub>]</sub> SAHIL	<u> </u>	L
14	88218274324124	JUJWAL GILL	 	<u> </u>
15	88218274324125	<sub> </sub> VISHAL	<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 August' 2025 EXAMS -SCVT
Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR
Course: 662 / REFRIGERATION & AIR CONDITIONING TECHNICIAN Class: First
Subject: 44431 / TRADE THEORY

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

I have conducted 5% random checking of the OMR 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 August' 2025 EXAMS -SCVT

Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course: 662 / REFRIGERATION & AIR CONDITIONING TECHNICIAN

Class: First

Subject: 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88218274324103	JAMIT KUMAR	<u> </u>	L
2	88218274324104	ARSHDEEP SINGH	<u> </u>	<u> </u>
3	88218274324105	CHIRAG MALHOTRA	<u> </u>	<u> </u>
4	88218274324106	J DAMAN KUMAR	<u> </u>	<u> </u>
5 	88218274324109	JAPNEET SINGH	<u> </u>	L
6	88218274324111	<sub> </sub> KESHAV	<u> </u>	<u> </u>
7	88218274324112	KHUSHAL HEER	<u> </u>	<u> </u>
8	88218274324113	<sub> </sub> KHUSHPAL	<u> </u>	<u> </u>
9	88218274324116	<sub> </sub> MOHJEET SINGH	<u> </u>	<u> </u>
10	88218274324118	<sub> </sub> RAJAT SIDHU	<u> </u>	<u> </u>
11	88218274324119	ROHIT KUMAR	<u> </u>	L
12	88218274324120	SACHIN MAHI	<u> </u>	L
13	88218274324121	<sub>]</sub> SAHIL	<u> </u>	<u> </u>
14	88218274324124	JUJWAL GILL	 	<u> </u>
15	88218274324125	VISHAL		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 August' 2025 EXAMS -SCVT 5580 / GOVT. ITI ADAMPUR, JALANDHAR Center Name: Course: 662 / REFRIGERATION & AIR CONDITIONING TECHNICIAN Class: First

Subject: 44434 / EMPLOYBILITY SKILL

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

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

Undertaki ng

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

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random 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 August' 2025 EXAMS -SCVT

Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course: 662 / REFRIGERATION & AIR CONDITIONING TECHNICIAN

Class: First

Subject: 44435 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88218274324103	JAMIT KUMAR	<u> </u>	L
2	88218274324104	ARSHDEEP SINGH	<u> </u>	L
3	88218274324105	CHIRAG MALHOTRA	<u> </u>	L
4	88218274324106	DAMAN KUMAR	<u> </u>	L
5	88218274324109	JAPNEET SINGH	<u> </u>	L
6	88218274324111	<sub> </sub> KESHAV	<u> </u>	L
7	88218274324112	KHUSHAL HEER	<u> </u>	L
8	88218274324113	<sub> </sub> KHUSHPAL	<u> </u>	L
9	88218274324116	<sub> </sub> MOHJEET SINGH	<u> </u>	L
10	88218274324118	<sub> </sub> RAJAT SIDHU	<u> </u>	L
11	88218274324119	ROHIT KUMAR	<u> </u>	L
12	88218274324120	SACHIN MAHI	<u> </u>	L
13	88218274324121	<sub> </sub> SAHIL	<u> </u>	L
14	88218274324124	JUJWAL GILL	 	<u> </u>
15 	88218274324125	<sub> </sub> VISHAL	 	 

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 August' 2025 EXAMS -SCVT

Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course: 662 / REFRIGERATION & AIR CONDITIONING TECHNICIAN Class: First

Subject: 44435 / PRACTICAL

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

Total No. Of Answer Sheets Packed >

Name and Signature Of Incharge

Undertaking

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

ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT

PAGE: 1 of 1 Center Name:

5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course:

662 / REFRIGERATION & AIR CONDITIONING TECHNICIAN

Class: Second

Subject: 44441 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88218274323052	<sup>2</sup> JANKUSH		
2	8821827432305	DALJIT SINGH		
3	8821827432305	7 <sub> </sub> GURWINDER		
4	8821827432305	JAGMEET SINGH		
5	88218274323062	<sup>2</sup> <sub> </sub> RAJU		
6	8821827432306	3 <sub> </sub> RANJIT SINGH		
7	8821827432306	<sup>4</sup> <sub> </sub> ROHIT KUMAR		
8	8821827432306	SATWINDER SINGH		
9	8821827432306	9 <sub>J</sub> VIKAS MASIH		
То	otal No. Of Students i otal No. Of Answer Sh ame and Signature O	neets Packed >	osent:	
			Undertaki ng	
I ( abo hav her	(Name)	(Designation) vigilator. I have personally che supervision in today's exam, hav fany mistakes are found, I will	ecked and ensured tha ve been filled and sh not be entitled for	hereby certify that I have conducted the t particulars of all the students who aded correctly in the OMR sheets. I also any remuneration.
			Si gna	ture of the Invigilator
	nave conducted 20% rai Led correctly as per		of the said examinati	on and found that particulars have been
Nam	ne of the Superintende	ent	Si gna	ture of the Superintendent
l h fil	nave conducted 10% rai led correctly as per	ndom checking of the OMR sheet on instructions.	of the said examinati	on and found that particulars have been
Nam	ne of the Deputy Conti	roller	Si gna	ture of the Deputy Controller
l fil	have conducted 5% railed correctly as per	ndom checking of the OMR sheet o	of the said examinati	on and found that particulars have been

Signature of the Controller

Name of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT

PAGE: 1 of 1 Center Name:

5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course:

662 / REFRIGERATION & AIR CONDITIONING TECHNICIAN

Class: Second

Subject :	44444 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88218274323052	ANKUSH		L
2	88218274323055	DALJIT SINGH		L
3	88218274323057	GURWINDER		L
4	88218274323059	JAGMEET SINGH		L
5	88218274323062	RAJU		L
6	88218274323063	RANJIT SINGH		L
7	88218274323064	ROHIT KUMAR		L
8	88218274323066	SATWINDER SINGH		L
9	88218274323069	VIKAS MASIH		I
To	tal No. Of Students in tal No. Of Answer Sho me and Signature Of		ent:	
			Undertaki ng	
I (N abov have here	Name) ve examination as Invi e appeared under my su eby undertake that if	(Designation)_ gilator. I have personally check upervision in today's exam, have any mistakes are found, I will m	ked and ensured that been filled and shar not be entitled for a	ereby certify that I have conducted the particulars of all the students who ded correctly in the OMR sheets. I also any remuneration.
			Si gnat	ure of the Invigilator
I ha fill	ave conducted 20% rand ed correctly as per i	dom checking of the OMR sheet of nstructions.	the said examination	n and found that particulars have been
Name	e of the Superintender	nt	Si gnat	ure of the Superintendent
	ave conducted 10% rand ed correctly as per i		the said examination	n and found that particulars have been
Name	e of the Deputy Contro	oller	Si gnat	ure of the Deputy Controller
l h fill	nave conducted 5% rand ed correctly as per i	dom checking of the OMR sheet of nstructions.	the said examination	n and found that particulars have been

Signature of the Controller

Name of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT

PAGE: 1 of 1 Center Name:

5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course:

662 / REFRIGERATION & AIR CONDITIONING TECHNICIAN

Class: Second

Subject: 44445 / PRACTICAL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.	
1	88218274323052	ANKUSH			
2	88218274323055	<sub> </sub> DALJIT SINGH			
3	88218274323057	GURWINDER	<u> </u>		
4	88218274323059	JAGMEET SINGH	<u> </u>		
5	88218274323062	<sub>]</sub> RAJU	<u> </u>		
6	88218274323063	RANJIT SINGH	<u> </u>		
7	88218274323064	ROHIT KUMAR	<u> </u>		
8	88218274323066	SATWINDER SINGH	<u> </u>		
9	88218274323069	JVIKAS MASIH			
Tot	tal No. Of Students in tal No. Of Answer She me and Signature Of		ent:		
			Undertaki ng		
I (N abov have here	I (Name) hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.				
			Si gna	ture of the Invigilator	
	ave conducted 20% rand ed correctly as per i		the said examination	on and found that particulars have been	
Name	e of the Superintender	nt	Si gna	ture of the Superintendent	
	ave conducted 10% rand ed correctly as per i		the said examination	on and found that particulars have been	
Name	e of the Deputy Contro	ol I er	Si gna	ture of the Deputy Controller	
l h fill	nave conducted 5% rand ed correctly as per i	dom checking of the OMR sheet of nstructions.	the said examination	on and found that particulars have been	

Signature of the Controller

Name of the Controller

Class: First

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT

Center Name:

5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course: 675 / SOLAR TECHNICIAN ( ELECTRICAL)

Subject: 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.		
1	88288171723137	ABHISHEK KUMAR	<u> </u>	<u> </u>		
2	88288171723147	GULSHAN SINGH	<u> </u>	<u> </u>		
3	88288171723149	GURSHARN SINGH	<u> </u>	<u> </u>		
4	88288171723152	KARANVIR SINGH		<u> </u>		
T <sub>0</sub>	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					
na he	ve appeared under my st reby undertake that if	any mistakes are found, I will	not be entitled for	any remuneration.		
l l fi	nave conducted 20% rand led correctly as per i	dom checking of the OMR sheet of nstructions.	g .	ure of the Invigilator n and found that particulars have been		
Nai	me of the Superintender	nt	Si gnat	ure of the Superintendent		
l l fi	nave conducted 10% rand Hed correctly as per i	dom checking of the OMR sheet of nstructions.	the said examinatio	n and found that particulars have been		
Naı	me of the Deputy Contro	oller	Si gnat	ure of the Deputy Controller		
l fi	have conducted 5% rand led correctly as per i	dom checking of the OMR sheet of nstructions.	the said examinatio	n and found that particulars have been		
Nai	me of the Controller		Signat	ure of the Controller		

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course : 675 / SOLAR TECHNICIAN ( ELECTRICAL)

Class: First

44434 / EMPLOYBILITY SKILL Subject:

S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88288171723152 | KARANVIR 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

Name of the Superintendent

Signature of the Superintendent

I 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 filled correctly as per instructions.

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PUNJAB STATE BOARD OF TECHNICAL EDUCATION & INDUSTRIAL TRAINING PAGE: 1 ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR Course : 675 / SOLAR TECHNICIAN ( ELECTRICAL) Class: First 44435 / PRACTICAL Subject: S.No Name Of the Student Student's Sign. Regd. No. Answer Sheet No. 88288171723152 | KARANVIR SINGH Total No. Of Students in this Subject > Present : Absent: Total No. Of Answer Sheets Packed > Name and Signature Of Incharge Undertaki ng I (Name)\_\_\_\_\_\_ hereby certify that I have conducted the above examination as Invigilator. I have personally checked and ensured that particulars of all the students who have appeared under my supervision in today's exam, have been filled and shaded correctly in the OMR sheets. I also hereby undertake that if any mistakes are found, I will not be entitled for any remuneration.

Signature of the Invigilator

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

Name of the Superintendent

Signature of the Superintendent

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

Name of the Deputy Controller

Signature of the Deputy Controller

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

Name of the Controller

PAGE: 1 of 2 ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT

Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR

686 / Mechanic Electric Vehicle

Course: Class: First

Subject: 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88295174324126	JAMANDEEP SINGH	<u> </u>	L
2	88295174324127	JAMIT WALIA	<u> </u>	L
3	88295174324130	GURJOT SINGH	<u> </u>	L
4	88295174324131	GURPREET SINGH	<u> </u>	L
5 <u> </u>	88295174324132	GURSIMRAN SINGH	<u> </u>	L
6	88295174324133	HARDEEP SINGH		L
7	88295174324137	JASKARANPREET	<u> </u>	L
8	88295174324138	KARAMVIR SINGH	<u> </u>	L
9	88295174324139	LAKHWINDER SINGH	<u> </u>	L
10 <sub> </sub>	88295174324141	MANVEER SINGH	<u> </u>	L
11	88295174324143	PARDEEP KUMAR		
12	88295174324145	PAWAN DEEP		
13	88295174324146	<sub>]</sub> RAHUL KUMAR NAG		
14	88295174324148	SUMEET KUMAR DROCH		

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 August' 2025 EXAMS -SCVT

Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course: 686 / Mechanic Electric Vehicle Class: First

Subject: 44431 / TRADE THEORY

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

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

Undertaki ng

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Name of the Superintendent

Signature of the Superintendent

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Name of the Deputy Controller

Signature of the Deputy Controller

I have conducted 5% random 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 August' 2025 EXAMS -SCVT

Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course: 686 / Mechanic Electric Vehicle

Class: First

Subject: 44434 / EMPLOYBILITY SKILL

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88295174324126	JAMANDEEP SINGH		<u> </u>
2	88295174324127	JAMIT WALIA		L
3	88295174324130	GURJOT SINGH		L
4	88295174324131	GURPREET SINGH		L
5	88295174324132	GURSIMRAN SINGH		L
6	88295174324133	HARDEEP SINGH		L
7	88295174324137	JASKARANPREET		L
8	88295174324138	KARAMVIR SINGH		L
9	88295174324139	LAKHWINDER SINGH		L
10	88295174324141	MANVEER SINGH		L
11	88295174324143	PARDEEP KUMAR		L
12	88295174324145	PAWAN DEEP		L
13	88295174324146	RAHUL KUMAR NAG		L
14	88295174324148	SUMEET KUMAR DROCH		

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 August' 2025 EXAMS -SCVT

Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course: 686 / Mechanic Electric Vehicle Class: First

Subject: 44434 / EMPLOYBILITY SKILL

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

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

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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

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Name of the Controller

ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT

Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course: 686 / Mechanic Electric Vehicle

Class: First

Subject: 44435 / PRACTICAL

PAGE: 1

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88295174324126	JAMANDEEP SINGH	<u> </u>	<u></u>
2	88295174324127	JAMIT WALIA	<u> </u>	L
3	88295174324130	GURJOT SINGH		L
4	88295174324131	GURPREET SINGH		L
5 	88295174324132	GURSIMRAN SINGH		L
6 <u> </u>	88295174324133	HARDEEP SINGH		L
7	88295174324137	JASKARANPREET	<u> </u>	L
8	88295174324138	KARAMVIR SINGH		L
9	88295174324139	LAKHWINDER SINGH		L
10 <sub> </sub>	88295174324141	MANVEER SINGH		L
11	88295174324143	PARDEEP KUMAR		
12	88295174324145	PAWAN DEEP		
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Total No. Of Students in this Subject > Present : Absent:

Total No. Of Answer Sheets Packed >

PAGE: 2 of 2 ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT

Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR

Course : 686 / Mechanic Electric Vehicle Class: First

Subject: 44435 / PRACTICAL

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

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

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

PAGE: 1 of 1 ATTENDANCE CUM CHALLAN FORM - FOR August' 2025 EXAMS -SCVT

Center Name: 5580 / GOVT. ITI ADAMPUR, JALANDHAR

687 / Wood Work Technician

Course: Class: First

Subject: 44431 / TRADE THEORY

S.No	Regd. No.	Name Of the Student	Answer Sheet No.	Student's Sign.
1	88296171723179	HARPREET SINGH	<u> </u>	<u> </u>
2	88296171723181	INDERJIT SINGH GOMRA	<u> </u>	<u> </u>
3	88296171723184	JASMEET JASHAN SINGH		L
4		1/A D A N // D O I N   O   I		<u> </u>
Na I ( abo	e appeared under my si	Incharge  (Designation)  Igilator, I have personally chec	been filled and sha	ereby certify that I have conducted the particulars of all the students who ded correctly in the OMR sheets. I also any remuneration.
				ure of the Invigilator
l h fil	ave conducted 20% rand led correctly as per i	dom checking of the OMR sheet of instructions.	the said examinatio	n and found that particulars have been
Nam	e of the Superintender	nt	Si gnat	ure of the Superintendent
I have conducted 10% random checking of the OMR sheet of the said examination and found that particulars have been filled correctly as per instructions.				
Nam	e of the Deputy Contro	oller	Si gnat	ure of the Deputy Controller
l fil	have conducted 5% rand led correctly as per i	dom checking of the OMR sheet of instructions.	the said examinatio	n and found that particulars have been
Nam	e of the Controller		Si gnat	ure of the Controller