












Maharashtra State Board Of Vocational Examinations, Mumbai
Attendance Sheet

Center Code & Name : 330106 SAMEER VYAVSAY SHIKSHAN VA PRASHIKSHAN
Examination : July 2019 **Date :** 16/08/2019 **Time :** 10 AM (For 100
Course Code & Name : 304202 CONSTRUCTION SUPERVISOR
Subject : CONSTRUCTION PRACTICES 30420221 PRACTICAL

Name Of Supervisor :

Enrolment No.	Seat No.	Institute	Name Of Student	Photo	Signature
1863300001	1907330001	330106	KATRE SHRADDHA KESHARLAL		<input type="text"/>
1863300002	1907330002	330106	SALVE SHRAVIN DATTARAJ		<input type="text"/>
1863300003	1907330003	330106	MALYE KAMLESH RAMESH		<input type="text"/>
1863300004	1907330004	330106	RAHANGDALE ARTI CHOTELAL		<input type="text"/>
1863300005	1907330005	330106	BAGHELE GIRIRSH BALDEO		<input type="text"/>
1863300006	1907330006	330106	BISEN MEGHA GAJANAN		<input type="text"/>
1863300007	1907330007	330106	THAKARE RAKHI INDALLAL		<input type="text"/>
1863300008	1907330008	330106	PARDHI ASHISHKUMAR SURAJLAL		<input type="text"/>
1863300009	1907330009	330106	PARDHI SHUBHAM MAHENDRAKUMAR		<input type="text"/>
1863300010	1907330010	330106	THAKRE JAGRUTI TRIBHUVAN		<input type="text"/>
1863300011	1907330011	330106	PATLE KHEMENDRA CHANGOJI		<input type="text"/>

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

Supervisor

Exam Center In-Charge

Notice :





- 1) Student must check his course, seat no etc before sign.
- 2) Any Correction in student information should be immediately reported to concerned district office, in prescribe format by exam center In-charge

Maharashtra State Board Of Vocational Examinations, Mumbai
Attendance Sheet

Center Code & Name : 330106 SAMEER VYAVSAY SHIKSHAN VA PRASHIKSHAN
Examination : July 2019 **Date :** 16/08/2019 **Time :** 10 AM (For 100
Course Code & Name : 304202 CONSTRUCTION SUPERVISOR
Subject : CONSTRUCTION PRACTICES 30420221 PRACTICAL

Name Of Supervisor :

Enrolment No.	Seat No.	Institute	Name Of Student
1863300012	1907330012	330106	BANEWAR SANJAY DEORAO
1863300013	1907330013	330106	BAGHELE RAHUL DOMAJI
1863300014	1907330014	330106	BISEN PAYAL TANIKLAL
1863300015	1907330015	330106	BHAIRAM KIRTI BHEJRAM

Photo	Signature
	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
	<input type="text"/>

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

Supervisor

Exam Center In-Charge












Notice :

- 1) Student must check his course, seat no etc before sign.
- 2) Any Correction in student information should be immediately reported to concerned district office, in prescribed format by exam center In-charge

Maharashtra State Board Of Vocational Examinations, Mumbai
Attendance Sheet

Center Code & Name : 330106 SAMEER VYAVSAY SHIKSHAN VA PRASHIKSHAN
Examination : July 2019 **Date :** 17/08/2019 **Time :** 10 AM (For 100
Course Code & Name : 304202 CONSTRUCTION SUPERVISOR
Subject : SURVEYING AND LEVELING 30420222 PRACTICAL

Name Of Supervisor :

Enrolment No.	Seat No.	Institute	Name Of Student	Photo	Signature
1863300001	1907330001	330106	KATRE SHRADDHA KESHARLAL		<input type="text"/>
1863300002	1907330002	330106	SALVE SHRAVIN DATTARAJ		<input type="text"/>
1863300003	1907330003	330106	MALYE KAMLESH RAMESH		<input type="text"/>
1863300004	1907330004	330106	RAHANGDALE ARTI CHOTELAL		<input type="text"/>
1863300005	1907330005	330106	BAGHELE GIRIRSH BALDEO		<input type="text"/>
1863300006	1907330006	330106	BISEN MEGHA GAJANAN		<input type="text"/>
1863300007	1907330007	330106	THAKARE RAKHI INDALLAL		<input type="text"/>
1863300008	1907330008	330106	PARDHI ASHISHKUMAR SURAJLAL		<input type="text"/>
1863300009	1907330009	330106	PARDHI SHUBHAM MAHENDRAKUMAR		<input type="text"/>
1863300010	1907330010	330106	THAKRE JAGRUTI TRIBHUVAN		<input type="text"/>
1863300011	1907330011	330106	PATLE KHEMENDRA CHANGOJI		<input type="text"/>

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

Supervisor

Exam Center In-Charge

Notice :

- 1) Student must check his course, seat no etc before sign.
- 2) Any Correction in student information should be immediately reported to concerned district office, in prescribe format by exam center In-charge

Maharashtra State Board Of Vocational Examinations, Mumbai
Attendance Sheet

Center Code & Name : 330106 SAMEER VYAVSAY SHIKSHAN VA PRASHIKSHAN
Examination : July 2019 **Date :** 17/08/2019 **Time :** 10 AM (For 100
Course Code & Name : 304202 CONSTRUCTION SUPERVISOR
Subject : SURVEYING AND LEVELING 30420222 PRACTICAL

Name Of Supervisor :

Enrolment No. Seat No. Institute Name Of Student

1863300012 1907330012 330106 BANEWAR SANJAY DEORAO

Photo Signature



1863300013 1907330013 330106 BAGHELE RAHUL DOMAJI



1863300014 1907330014 330106 BISEN PAYAL TANIKLAL



1863300015 1907330015 330106 BHAIRAM KIRTI BHEJRAM



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

Supervisor

Exam Center In-Charge












Notice :

- 1) Student must check his course, seat no etc before sign.
- 2) Any Correction in student information should be immediately reported to concerned district office, in prescribed format by exam center In-charge

Maharashtra State Board Of Vocational Examinations, Mumbai
Attendance Sheet

Center Code & Name : 330266 NIRMAL INSTITUTE OF PARAMEDICAL AND DIGNOSTIC
Examination : July 2019 **Date :** 16/08/2019 **Time :** 10 AM (For 100
Course Code & Name : 201203 HEALTH WORKER
Subject : BASIC HEALTH SCIENCE & PROGRAMME 20120321 PRACTICAL

Name Of Supervisor :

Enrolment No.	Seat No.	Institute	Name Of Student	Photo	Signature
1863300046	1907330046	330266	CHAUHAN MAYA DEVLAL		<input type="text"/>
1863300047	1907330047	330266	TEMBHARE RITU BHARATLAL		<input type="text"/>
1863300048	1907330048	330266	PARDHIKAR RAGINI SATYAVIJAY		<input type="text"/>
1863300049	1907330049	330266	CHOUHAN SARIKA DINESH		<input type="text"/>
1863300050	1907330050	330266	TEMBHARE PURNIMA MURTIRAJ		<input type="text"/>
1863300051	1907330051	330266	TEMBHARE LAXMI BHUPATIRAJ		<input type="text"/>
1863300052	1907330052	330266	PATLE REKHA NANDLAL		<input type="text"/>
1863300053	1907330053	330266	CHOUDHARI MAHESH GOWARDHAN		<input type="text"/>
1863300054	1907330054	330266	WASNIK SWAPNIL YADORAO		<input type="text"/>
1863300055	1907330055	330266	MARTHE SURENDRA DALLURAM		<input type="text"/>
1863300056	1907330056	330266	PATLE ASHISH DHANRAJ		<input type="text"/>

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

Supervisor

Exam Center In-Charge

Notice :

- 1) Student must check his course, seat no etc before sign.
- 2) Any Correction in student information should be immidiatly reported to concerned district office, in prescribe format by exam center In-charge

Maharashtra State Board Of Vocational Examinations, Mumbai
Attendance Sheet

Center Code & Name : 330266 NIRMAL INSTITUTE OF PARAMEDICAL AND DIGNOSTIC
Examination : July 2019 **Date :** 16/08/2019 **Time :** 10 AM (For 100
Course Code & Name : 201203 HEALTH WORKER
Subject : BASIC HEALTH SCIENCE & PROGRAMME 20120321 PRACTICAL

Name Of Supervisor :

Enrolment No.	Seat No.	Institute	Name Of Student	Photo	Signature
1863300057	1907330057	330266	TEMBHARE MOHIT HARICHAND		<input type="text"/>
1863300058	1907330058	330266	NYAYKARE JITENDRA DAKTAR		<input type="text"/>
1863300059	1907330059	330266	PATLE RAKESH HIRALAL		<input type="text"/>
1863300060	1907330060	330266	BAWANKAR DIGAMBER LALCHAND		<input type="text"/>
1863300061	1907330061	330266	PARDHI UMESH TUKARAM		<input type="text"/>
1863300062	1907330062	330266	PATLE SATISH UTTAM		<input type="text"/>
1763300081	1907330118	330266	MARTHE UMESH RUPCHAND		<input type="text"/>
1763300089	1907330121	330266	CHAVHAN RUPALI MADAN		<input type="text"/>

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

Supervisor

Exam Center In-Charge












Notice :

- 1) Student must check his course, seat no etc before sign.
- 2) Any Correction in student information should be immidiatly reported to concerned district office, in prescribe format by exam center In-charge

Maharashtra State Board Of Vocational Examinations, Mumbai
Attendance Sheet

Center Code & Name : 330266 NIRMAL INSTITUTE OF PARAMEDICAL AND DIGNOSTIC
Examination : July 2019 **Date :** 17/08/2019 **Time :** 10 AM (For 100
Course Code & Name : 201203 HEALTH WORKER
Subject : I.E.C & NON COMMUNICABLE DISEASES MENTAL HEALTH 20120322 PRACTICAL

Name Of Supervisor :

Enrolment No.	Seat No.	Institute	Name Of Student	Photo	Signature
1863300046	1907330046	330266	CHAUHAN MAYA DEVLAL		<input type="text"/>
1863300047	1907330047	330266	TEMBHARE RITU BHARATLAL		<input type="text"/>
1863300048	1907330048	330266	PARDHIKAR RAGINI SATYAVIJAY		<input type="text"/>
1863300049	1907330049	330266	CHOUHAN SARIKA DINESH		<input type="text"/>
1863300050	1907330050	330266	TEMBHARE PURNIMA MURTIRAJ		<input type="text"/>
1863300051	1907330051	330266	TEMBHARE LAXMI BHUPATIRAJ		<input type="text"/>
1863300052	1907330052	330266	PATLE REKHA NANDLAL		<input type="text"/>
1863300053	1907330053	330266	CHODHARI MAHESH GOWARDHAN		<input type="text"/>
1863300054	1907330054	330266	WASNIK SWAPNIL YADORAO		<input type="text"/>
1863300055	1907330055	330266	MARTHE SURENDRA DALLURAM		<input type="text"/>
1863300056	1907330056	330266	PATLE ASHISH DHANRAJ		<input type="text"/>

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

Supervisor

Exam Center In-Charge

Notice :

- 1) Student must check his course, seat no etc before sign.
- 2) Any Correction in student information should be immidiatly reported to concerned district office, in prescribe format by exam center In-charge

Maharashtra State Board Of Vocational Examinations, Mumbai
Attendance Sheet

Center Code & Name : 330266 NIRMAL INSTITUTE OF PARAMEDICAL AND DIGNOSTIC
Examination : July 2019 **Date :** 17/08/2019 **Time :** 10 AM (For 100
Course Code & Name : 201203 HEALTH WORKER
Subject : I.E.C & NON COMMUNICABLE DISEASES MENTAL HEALTH 20120322 PRACTICAL

Name Of Supervisor :

Enrolment No.	Seat No.	Institute	Name Of Student	Photo	Signature
1863300057	1907330057	330266	TEMBHARE MOHIT HARICHAND		<input type="text"/>
1863300058	1907330058	330266	NYAYKARE JITENDRA DAKTAR		<input type="text"/>
1863300059	1907330059	330266	PATLE RAKESH HIRALAL		<input type="text"/>
1863300060	1907330060	330266	BAWANKAR DIGAMBER LALCHAND		<input type="text"/>
1863300061	1907330061	330266	PARDHI UMESH TUKARAM		<input type="text"/>
1863300062	1907330062	330266	PATLE SATISH UTTAM		<input type="text"/>
1763300081	1907330118	330266	MARTHE UMESH RUPCHAND		<input type="text"/>
1763300089	1907330121	330266	CHAVHAN RUPALI MADAN		<input type="text"/>

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

Supervisor

Exam Center In-Charge












Notice :

- 1) Student must check his course, seat no etc before sign.
- 2) Any Correction in student information should be immidiatly reported to concerned district office, in prescribe format by exam center In-charge

Maharashtra State Board Of Vocational Examinations, Mumbai
Attendance Sheet

Center Code & Name : 330266 NIRMAL INSTITUTE OF PARAMEDICAL AND DIGNOSTIC
Examination : July 2019 **Date :** 19/08/2019 **Time :** 10 AM (For 100
Course Code & Name : 201203 HEALTH WORKER
Subject : NUTRITION & R.C.H. 20120323 PRACTICAL

Name Of Supervisor :

Enrolment No.	Seat No.	Institute	Name Of Student	Photo	Signature
1863300046	1907330046	330266	CHAUHAN MAYA DEVLAL		<input type="text"/>
1863300047	1907330047	330266	TEMBHARE RITU BHARATLAL		<input type="text"/>
1863300048	1907330048	330266	PARDHIKAR RAGINI SATYAVIJAY		<input type="text"/>
1863300049	1907330049	330266	CHOUHAN SARIKA DINESH		<input type="text"/>
1863300050	1907330050	330266	TEMBHARE PURNIMA MURTIRAJ		<input type="text"/>
1863300051	1907330051	330266	TEMBHARE LAXMI BHUPATIRAJ		<input type="text"/>
1863300052	1907330052	330266	PATLE REKHA NANDLAL		<input type="text"/>
1863300053	1907330053	330266	CHODHARI MAHESH GOWARDHAN		<input type="text"/>
1863300054	1907330054	330266	WASNIK SWAPNIL YADORAO		<input type="text"/>
1863300055	1907330055	330266	MARTHE SURENDRA DALLURAM		<input type="text"/>
1863300056	1907330056	330266	PATLE ASHISH DHANRAJ		<input type="text"/>

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

Supervisor

Exam Center In-Charge

Notice :

- 1) Student must check his course, seat no etc before sign.
- 2) Any Correction in student information should be immidiatly reported to concerned district office, in prescribe format by exam center In-charge

Maharashtra State Board Of Vocational Examinations, Mumbai
Attendance Sheet

Center Code & Name : 330266 NIRMAL INSTITUTE OF PARAMEDICAL AND DIGNOSTIC
Examination : July 2019 **Date :** 19/08/2019 **Time :** 10 AM (For 100
Course Code & Name : 201203 HEALTH WORKER
Subject : NUTRITION & R.C.H. 20120323 PRACTICAL

Name Of Supervisor :

Enrolment No.	Seat No.	Institute	Name Of Student	Photo	Signature
1863300057	1907330057	330266	TEMBHARE MOHIT HARICHAND		<input type="text"/>
1863300058	1907330058	330266	NYAYKARE JITENDRA DAKTAR		<input type="text"/>
1863300059	1907330059	330266	PATLE RAKESH HIRALAL		<input type="text"/>
1863300060	1907330060	330266	BAWANKAR DIGAMBER LALCHAND		<input type="text"/>
1863300061	1907330061	330266	PARDHI UMESH TUKARAM		<input type="text"/>
1863300062	1907330062	330266	PATLE SATISH UTTAM		<input type="text"/>
1763300081	1907330118	330266	MARTHE UMESH RUPCHAND		<input type="text"/>
1763300089	1907330121	330266	CHAVHAN RUPALI MADAN		<input type="text"/>

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

Supervisor

Exam Center In-Charge












Notice :

- 1) Student must check his course, seat no etc before sign.
- 2) Any Correction in student information should be immidiatly reported to concerned district office, in prescribe format by exam center In-charge

Maharashtra State Board Of Vocational Examinations, Mumbai
Attendance Sheet

Center Code & Name : 330266 NIRMAL INSTITUTE OF PARAMEDICAL AND DIGNOSTIC
Examination : July 2019 **Date :** 19/08/2019 **Time :** 10 AM (For 100
Course Code & Name : 201230 PATHOLOGY TECHNICIAN
Subject : BIOCHEMISTRY AND LABORATORY MANAGEMENT 20123023 PRACTICAL

Name Of Supervisor :

Enrolment No.	Seat No.	Institute	Name Of Student	Photo	Signature
1863300016	1907330016	330266	CHAUDHARI TEKESHWARI NILKANTH		<input type="text"/>
1863300017	1907330017	330266	DONGARE LATA CHANDRASHEKHAR		<input type="text"/>
1863300018	1907330018	330266	LILHARE PRITI JAICHAND		<input type="text"/>
1863300019	1907330019	330266	WAGHMARE SONI TARUNKUMAR		<input type="text"/>
1863300020	1907330020	330266	RAHANGDALE SAKSHI DINDAYAL		<input type="text"/>
1863300021	1907330021	330266	GAURE PRITI SURENDRA		<input type="text"/>
1863300022	1907330022	330266	SHENDE PRIYA HEMRAJ		<input type="text"/>
1863300023	1907330023	330266	KOHARE ASHWINI ARVIND		<input type="text"/>
1863300024	1907330024	330266	KAWRE PRATIMA LOKCHAND		<input type="text"/>
1863300025	1907330025	330266	KAWRE KIRTIMA GHUDHAN		<input type="text"/>
1863300026	1907330026	330266	PADOLE KHUSHBU JAGDISH		<input type="text"/>

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

Supervisor

Exam Center In-Charge












Notice :

- 1) Student must check his course, seat no etc before sign.
- 2) Any Correction in student information should be immidiatly reported to concerned district office, in prescribe format by exam center In-charge

Maharashtra State Board Of Vocational Examinations, Mumbai
Attendance Sheet

Center Code & Name : 330266 NIRMAL INSTITUTE OF PARAMEDICAL AND DIGNOSTIC
Examination : July 2019 **Date :** 19/08/2019 **Time :** 10 AM (For 100
Course Code & Name : 201230 PATHOLOGY TECHNICIAN
Subject : BIOCHEMISTRY AND LABORATORY MANAGEMENT 20123023 PRACTICAL

Name Of Supervisor :

Enrolment No.	Seat No.	InstituteName	Name Of Student	Photo	Signature
1863300027	1907330027	330266	TURKAR ANJALI MOHARLAL		<input type="text"/>
1863300028	1907330028	330266	PARDHI PANKAJ DHANRAJ		<input type="text"/>
1863300029	1907330029	330266	AMBULE PRIYA YOGRAJ		<input type="text"/>
1863300030	1907330030	330266	WAGHADE SITARA SANTOSH		<input type="text"/>
1863300031	1907330031	330266	RAHANGDALE ASHISH RAGHUNATH		<input type="text"/>
1863300032	1907330032	330266	PATLE DYANESHWARI NANDLAL		<input type="text"/>
1863300033	1907330033	330266	MAUJE HITESHRI MANIK		<input type="text"/>
1863300034	1907330034	330266	PATLE SWATEE VISHWANATH		<input type="text"/>
1863300035	1907330035	330266	KACHHUWAH VIKASSINGH MANNUSINGH		<input type="text"/>
1863300036	1907330036	330266	KAMBLE SAVITA UDARAM		<input type="text"/>
1863300037	1907330037	330266	RAHANGDALE MANISHA PURANLAL		<input type="text"/>

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

Supervisor

Exam Center In-Charge










Notice :

- 1) Student must check his course, seat no etc before sign.
- 2) Any Correction in student information should be immidiatly reported to concerned district office, in prescribe format by exam center In-charge

Maharashtra State Board Of Vocational Examinations, Mumbai
Attendance Sheet

Center Code & Name : 330266 NIRMAL INSTITUTE OF PARAMEDICAL AND DIGNOSTIC
Examination : July 2019 **Date :** 19/08/2019 **Time :** 10 AM (For 100
Course Code & Name : 201230 PATHOLOGY TECHNICIAN
Subject : BIOCHEMISTRY AND LABORATORY MANAGEMENT 20123023 PRACTICAL

Name Of Supervisor :

Enrolment No.	Seat No.	InstituteName	Name Of Student	Photo	Signature
1863300038	1907330038	330266	BISEN PRAGATI BANDULAL		<input type="text"/>
1863300039	1907330039	330266	BAWANKAR SEEMA CHARANLAL		<input type="text"/>
1863300040	1907330040	330266	CHAUHAN RIYA SANJAY		<input type="text"/>
1863300041	1907330041	330266	BISEN PALLAVI CHHOTELAL		<input type="text"/>
1863300042	1907330042	330266	DAHAT KALYANI JANIBABAU		<input type="text"/>
1863300043	1907330043	330266	GAUR PRALAYSINGH KRUPALSINGH		<input type="text"/>
1863300044	1907330044	330266	BOPCHE KIRAN CHAMBHARU		<input type="text"/>
1863300045	1907330045	330266	BISEN MONISH CHANDANLAL		<input type="text"/>
1763300052	1907330123	330266	KAWADE SHUBHAM PRAKASH		<input type="text"/>

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

Supervisor

Exam Center In-Charge












Notice :

- 1) Student must check his course, seat no etc before sign.
- 2) Any Correction in student information should be immidiatly reported to concerned district office, in prescribe format by exam center In-charge

Maharashtra State Board Of Vocational Examinations, Mumbai
Attendance Sheet

Center Code & Name : 330266 NIRMAL INSTITUTE OF PARAMEDICAL AND DIGNOSTIC
Examination : July 2019 **Date :** 17/08/2019 **Time :** 10 AM (For 100
Course Code & Name : 201230 PATHOLOGY TECHNICIAN
Subject : HAEMATOLOGY, BLOOD BANKING AND PATHOLOGY 20123022 PRACTICAL

Name Of Supervisor :

Enrolment No.	Seat No.	Institute	Name Of Student	Photo	Signature
1863300016	1907330016	330266	CHAUDHARI TEKESHWARI NILKANTH		<input type="text"/>
1863300017	1907330017	330266	DONGARE LATA CHANDRASHEKHAR		<input type="text"/>
1863300018	1907330018	330266	LILHARE PRITI JAICHAND		<input type="text"/>
1863300019	1907330019	330266	WAGHMARE SONI TARUNKUMAR		<input type="text"/>
1863300020	1907330020	330266	RAHANGDALE SAKSHI DINDAYAL		<input type="text"/>
1863300021	1907330021	330266	GAURE PRITI SURENDRA		<input type="text"/>
1863300022	1907330022	330266	SHENDE PRIYA HEMRAJ		<input type="text"/>
1863300023	1907330023	330266	KOHARE ASHWINI ARVIND		<input type="text"/>
1863300024	1907330024	330266	KAWRE PRATIMA LOKCHAND		<input type="text"/>
1863300025	1907330025	330266	KAWRE KIRTIMA GHUDHAN		<input type="text"/>
1863300026	1907330026	330266	PADOLE KHUSHBU JAGDISH		<input type="text"/>

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

Supervisor

Exam Center In-Charge












Notice :

- 1) Student must check his course, seat no etc before sign.
- 2) Any Correction in student information should be immidiatly reported to concerned district office, in prescribe format by exam center In-charge

Maharashtra State Board Of Vocational Examinations, Mumbai
Attendance Sheet

Center Code & Name : 330266 NIRMAL INSTITUTE OF PARAMEDICAL AND DIGNOSTIC
Examination : July 2019 **Date :** 17/08/2019 **Time :** 10 AM (For 100
Course Code & Name : 201230 PATHOLOGY TECHNICIAN
Subject : HAEMATOLOGY, BLOOD BANKING AND PATHOLOGY 20123022 PRACTICAL

Name Of Supervisor :

Enrolment No.	Seat No.	InstituteName	Name Of Student	Photo	Signature
1863300027	1907330027	330266	TURKAR ANJALI MOHARLAL		<input type="text"/>
1863300028	1907330028	330266	PARDHI PANKAJ DHANRAJ		<input type="text"/>
1863300029	1907330029	330266	AMBULE PRIYA YOGRAJ		<input type="text"/>
1863300030	1907330030	330266	WAGHADE SITARA SANTOSH		<input type="text"/>
1863300031	1907330031	330266	RAHANGDALE ASHISH RAGHUNATH		<input type="text"/>
1863300032	1907330032	330266	PATLE DYANESHWARI NANDLAL		<input type="text"/>
1863300033	1907330033	330266	MAUJE HITESHRI MANIK		<input type="text"/>
1863300034	1907330034	330266	PATLE SWATEE VISHWANATH		<input type="text"/>
1863300035	1907330035	330266	KACHHUWAH VIKASSINGH MANNUSINGH		<input type="text"/>
1863300036	1907330036	330266	KAMBLE SAVITA UDARAM		<input type="text"/>
1863300037	1907330037	330266	RAHANGDALE MANISHA PURANLAL		<input type="text"/>

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

Supervisor

Exam Center In-Charge


Notice :

- 1) Student must check his course, seat no etc before sign.
- 2) Any Correction in student information should be immidiatly reported to concerned district office, in prescribe format by exam center In-charge

Maharashtra State Board Of Vocational Examinations, Mumbai
Attendance Sheet

Center Code & Name : 330266 NIRMAL INSTITUTE OF PARAMEDICAL AND DIGNOSTIC
Examination : July 2019 **Date :** 17/08/2019 **Time :** 10 AM (For 100
Course Code & Name : 201230 PATHOLOGY TECHNICIAN
Subject : HAEMATOLOGY, BLOOD BANKING AND PATHOLOGY 20123022 PRACTICAL

Name Of Supervisor :

Enrolment No.	Seat No.	Institute	Name Of Student	Photo	Signature
1863300038	1907330038	330266	BISEN PRAGATI BANDULAL		<input type="text"/>
1863300039	1907330039	330266	BAWANKAR SEEMA CHARANLAL		<input type="text"/>
1863300040	1907330040	330266	CHAUHAN RIYA SANJAY		<input type="text"/>
1863300041	1907330041	330266	BISEN PALLAVI CHHOTELAL		<input type="text"/>
1863300042	1907330042	330266	DAHAT KALYANI JANIBABAU		<input type="text"/>
1863300043	1907330043	330266	GAUR PRALAYSINGH KRUPALSINGH		<input type="text"/>
1863300044	1907330044	330266	BOPCHE KIRAN CHAMBHARU		<input type="text"/>
1863300045	1907330045	330266	BISEN MONISH CHANDANLAL		<input type="text"/>

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

Supervisor

Exam Center In-Charge












Notice :

- 1) Student must check his course, seat no etc before sign.
- 2) Any Correction in student information should be immidiatly reported to concerned district office, in prescribe format by exam center In-charge

Maharashtra State Board Of Vocational Examinations, Mumbai
Attendance Sheet

Center Code & Name : 330266 NIRMAL INSTITUTE OF PARAMEDICAL AND DIGNOSTIC
Examination : July 2019 **Date :** 16/08/2019 **Time :** 10 AM (For 100
Course Code & Name : 201230 PATHOLOGY TECHNICIAN
Subject : MICROBIOLOGY AND SEROLOGY 20123021 PRACTICAL

Name Of Supervisor :

Enrolment No.	Seat No.	Institute	Name Of Student	Photo	Signature
1863300016	1907330016	330266	CHAUDHARI TEKESHWARI NILKANTH		<input type="text"/>
1863300017	1907330017	330266	DONGARE LATA CHANDRASHEKHAR		<input type="text"/>
1863300018	1907330018	330266	LILHARE PRITI JAICHAND		<input type="text"/>
1863300019	1907330019	330266	WAGHMARE SONI TARUNKUMAR		<input type="text"/>
1863300020	1907330020	330266	RAHANGDALE SAKSHI DINDAYAL		<input type="text"/>
1863300021	1907330021	330266	GAURE PRITI SURENDRA		<input type="text"/>
1863300022	1907330022	330266	SHENDE PRIYA HEMRAJ		<input type="text"/>
1863300023	1907330023	330266	KOHARE ASHWINI ARVIND		<input type="text"/>
1863300024	1907330024	330266	KAWRE PRATIMA LOKCHAND		<input type="text"/>
1863300025	1907330025	330266	KAWRE KIRTIMA GHUDHAN		<input type="text"/>
1863300026	1907330026	330266	PADOLE KHUSHBU JAGDISH		<input type="text"/>

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

Supervisor

Exam Center In-Charge












Notice :

- 1) Student must check his course, seat no etc before sign.
- 2) Any Correction in student information should be immidiatly reported to concerned district office, in prescribe format by exam center In-charge

Maharashtra State Board Of Vocational Examinations, Mumbai
Attendance Sheet

Center Code & Name : 330266 NIRMAL INSTITUTE OF PARAMEDICAL AND DIGNOSTIC
Examination : July 2019 **Date :** 16/08/2019 **Time :** 10 AM (For 100
Course Code & Name : 201230 PATHOLOGY TECHNICIAN
Subject : MICROBIOLOGY AND SEROLOGY 20123021 PRACTICAL

Name Of Supervisor :

Enrolment No.	Seat No.	Institute Name	Name Of Student	Photo	Signature
1863300027	1907330027	330266	TURKAR ANJALI MOHARLAL		<input type="text"/>
1863300028	1907330028	330266	PARDHI PANKAJ DHANRAJ		<input type="text"/>
1863300029	1907330029	330266	AMBULE PRIYA YOGRAJ		<input type="text"/>
1863300030	1907330030	330266	WAGHADE SITARA SANTOSH		<input type="text"/>
1863300031	1907330031	330266	RAHANGDALE ASHISH RAGHUNATH		<input type="text"/>
1863300032	1907330032	330266	PATLE DYANESHWARI NANDLAL		<input type="text"/>
1863300033	1907330033	330266	MAUJE HITESHRI MANIK		<input type="text"/>
1863300034	1907330034	330266	PATLE SWATEE VISHWANATH		<input type="text"/>
1863300035	1907330035	330266	KACHHUWAH VIKASSINGH MANNUSINGH		<input type="text"/>
1863300036	1907330036	330266	KAMBLE SAVITA UDARAM		<input type="text"/>
1863300037	1907330037	330266	RAHANGDALE MANISHA PURANLAL		<input type="text"/>

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

Supervisor

Exam Center In-Charge

Notice :

- 1) Student must check his course, seat no etc before sign.
- 2) Any Correction in student information should be immidiatly reported to concerned district office, in prescribe format by exam center In-charge

Maharashtra State Board Of Vocational Examinations, Mumbai
Attendance Sheet

Center Code & Name : 330266 NIRMAL INSTITUTE OF PARAMEDICAL AND DIGNOSTIC
Examination : July 2019 **Date :** 16/08/2019 **Time :** 10 AM (For 100
Course Code & Name : 201230 PATHOLOGY TECHNICIAN
Subject : MICROBIOLOGY AND SEROLOGY 20123021 PRACTICAL

Name Of Supervisor :

Enrolment No.	Seat No.	Institute	Name Of Student	Photo	Signature
1863300038	1907330038	330266	BISEN PRAGATI BANDULAL		<input type="text"/>
1863300039	1907330039	330266	BAWANKAR SEEMA CHARANLAL		<input type="text"/>
1863300040	1907330040	330266	CHAUHAN RIYA SANJAY		<input type="text"/>
1863300041	1907330041	330266	BISEN PALLAVI CHHOTELAL		<input type="text"/>
1863300042	1907330042	330266	DAHAT KALYANI JANIBABAU		<input type="text"/>
1863300043	1907330043	330266	GAUR PRALAYSINGH KRUPALSINGH		<input type="text"/>
1863300044	1907330044	330266	BOPCHE KIRAN CHAMBHARU		<input type="text"/>
1863300045	1907330045	330266	BISEN MONISH CHANDANLAL		<input type="text"/>

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

Supervisor

Exam Center In-Charge












Notice :

- 1) Student must check his course, seat no etc before sign.
- 2) Any Correction in student information should be immidiatly reported to concerned district office, in prescribe format by exam center In-charge

Maharashtra State Board Of Vocational Examinations, Mumbai
Attendance Sheet

Center Code & Name : 330273 PUSHPA GARMENT MANUFACTURING AND FASHION
Examination : July 2019 **Date :** 16/08/2019 **Time :** 10 AM (For 100
Course Code & Name : 410204 GARMENT MANUFACTURING & FASHION DESIGNING
Subject : FASHION ILLUSTRATION 41020421 PRACTICAL

Name Of Supervisor :

Enrolment No.	Seat No.	Institute	Name Of Student	Photo	Signature
1863300063	1907330063	330273	BEDRE SANGEETA BUDHRAM		<input type="text"/>
1863300064	1907330064	330273	UKEY REKHABAI KUSHOBA		<input type="text"/>
1863300065	1907330065	330273	RAUT USHA KISHNA		<input type="text"/>
1863300066	1907330066	330273	NEWARE AMRUTA SUKRAM		<input type="text"/>
1863300067	1907330067	330273	VAIDYA SAKSHI PYARELAL		<input type="text"/>
1863300068	1907330068	330273	RUSHE SONALI DILIP		<input type="text"/>
1863300069	1907330069	330273	CHUTE BHARTI PREMLAL		<input type="text"/>
1863300070	1907330070	330273	MESHARAM PALLAVI KUWARLAL		<input type="text"/>
1863300071	1907330071	330273	BAHEKAR ANJALIBAI BHUMESHWAR		<input type="text"/>
1863300072	1907330072	330273	CHAWAKE ARCHANA MITARAM		<input type="text"/>
1863300073	1907330073	330273	UKEY DEVESHWARI RAJARAM		<input type="text"/>

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

Supervisor

Exam Center In-Charge

Notice :

- 1) Student must check his course, seat no etc before sign.
- 2) Any Correction in student information should be immediately reported to concerned district office, in prescribe format by exam center In-charge

Maharashtra State Board Of Vocational Examinations, Mumbai
Attendance Sheet

Center Code & Name : 330273 PUSHPA GARMENT MANUFACTURING AND FASHION
Examination : July 2019 **Date :** 16/08/2019 **Time :** 10 AM (For 100
Course Code & Name : 410204 GARMENT MANUFACTURING & FASHION DESIGNING
Subject : FASHION ILLUSTRATION 41020421 PRACTICAL

Name Of Supervisor :

Enrolment No.	Seat No.	Institute	Name Of Student	Photo	Signature
1863300074	1907330074	330273	SHIWANKAR SHILA YADORAO		<input type="text"/>
1863300075	1907330075	330273	BISEN RITA ULHASRAO		<input type="text"/>
1863300076	1907330076	330273	BISEN GITA ULHASRAO		<input type="text"/>
1863300077	1907330077	330273	BAWANTHADE REENA OMPRAKASH		<input type="text"/>
1863300078	1907330078	330273	BAHEKAR KIRAN SUBHASH		<input type="text"/>
1863300079	1907330079	330273	NEWARE NIRASHA SHYAMLAL		<input type="text"/>
1863300080	1907330080	330273	HATTIMARE PRITI BHUMESHWAR		<input type="text"/>
1863300081	1907330081	330273	MANKAR VAMANRAO TILAKCHAND		<input type="text"/>

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

Supervisor

Exam Center In-Charge












Notice :

- 1) Student must check his course, seat no etc before sign.
- 2) Any Correction in student information should be immediately reported to concerned district office, in prescribe format by exam center In-charge

Maharashtra State Board Of Vocational Examinations, Mumbai
Attendance Sheet

Center Code & Name : 330273 PUSHPA GARMENT MANUFACTURING AND FASHION
Examination : July 2019 **Date :** 17/08/2019 **Time :** 10 AM (For 100
Course Code & Name : 410204 GARMENT MANUFACTURING & FASHION DESIGNING
Subject : KIDS FASHION GARMENT 41020422 PRACTICAL

Name Of Supervisor :

Enrolment No.	Seat No.	Institute	Name Of Student	Photo	Signature
1863300063	1907330063	330273	BEDRE SANGEETA BUDHRAM		<input type="text"/>
1863300064	1907330064	330273	UKEY REKHABAI KUSHOBA		<input type="text"/>
1863300065	1907330065	330273	RAUT USHA KISHNA		<input type="text"/>
1863300066	1907330066	330273	NEWARE AMRUTA SUKRAM		<input type="text"/>
1863300067	1907330067	330273	VAIDYA SAKSHI PYARELAL		<input type="text"/>
1863300068	1907330068	330273	RUSHE SONALI DILIP		<input type="text"/>
1863300069	1907330069	330273	CHUTE BHARTI PREMLAL		<input type="text"/>
1863300070	1907330070	330273	MESHARAM PALLAVI KUWARLAL		<input type="text"/>
1863300071	1907330071	330273	BAHEKAR ANJALIBAI BHUMESHWAR		<input type="text"/>
1863300072	1907330072	330273	CHAWAKE ARCHANA MITARAM		<input type="text"/>
1863300073	1907330073	330273	UKEY DEVESHWARI RAJARAM		<input type="text"/>

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

Supervisor

Exam Center In-Charge

Notice :

- 1) Student must check his course, seat no etc before sign.
- 2) Any Correction in student information should be immediately reported to concerned district office, in prescribe format by exam center In-charge

Maharashtra State Board Of Vocational Examinations, Mumbai
Attendance Sheet

Center Code & Name : 330273 PUSHPA GARMENT MANUFACTURING AND FASHION
Examination : July 2019 **Date :** 17/08/2019 **Time :** 10 AM (For 100
Course Code & Name : 410204 GARMENT MANUFACTURING & FASHION DESIGNING
Subject : KIDS FASHION GARMENT 41020422 PRACTICAL

Name Of Supervisor :

Enrolment No.	Seat No.	Institute	Name Of Student	Photo	Signature
1863300074	1907330074	330273	SHIWANKAR SHILA YADORAO		<input type="text"/>
1863300075	1907330075	330273	BISEN RITA ULHASRAO		<input type="text"/>
1863300076	1907330076	330273	BISEN GITA ULHASRAO		<input type="text"/>
1863300077	1907330077	330273	BAWANTHADE REENA OMPRAKASH		<input type="text"/>
1863300078	1907330078	330273	BAHEKAR KIRAN SUBHASH		<input type="text"/>
1863300079	1907330079	330273	NEWARE NIRASHA SHYAMLAL		<input type="text"/>
1863300080	1907330080	330273	HATTIMARE PRITI BHUMESHWAR		<input type="text"/>
1863300081	1907330081	330273	MANKAR VAMANRAO TILAKCHAND		<input type="text"/>

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

Supervisor

Exam Center In-Charge












Notice :

- 1) Student must check his course, seat no etc before sign.
- 2) Any Correction in student information should be immediately reported to concerned district office, in prescribe format by exam center In-charge

Maharashtra State Board Of Vocational Examinations, Mumbai
Attendance Sheet

Center Code & Name : 330273 PUSHPA GARMENT MANUFACTURING AND FASHION
Examination : July 2019 **Date :** 19/08/2019 **Time :** 10 AM (For 100
Course Code & Name : 410204 GARMENT MANUFACTURING & FASHION DESIGNING
Subject : LADIES & GENTS FASHION GARMENT 41020423 PRACTICAL

Name Of Supervisor :

Enrolment No.	Seat No.	Institute	Name Of Student	Photo	Signature
1863300063	1907330063	330273	BEDRE SANGEETA BUDHRAM		<input type="text"/>
1863300064	1907330064	330273	UKEY REKHABAI KUSHOBA		<input type="text"/>
1863300065	1907330065	330273	RAUT USHA KISHNA		<input type="text"/>
1863300066	1907330066	330273	NEWARE AMRUTA SUKRAM		<input type="text"/>
1863300067	1907330067	330273	VAIDYA SAKSHI PYARELAL		<input type="text"/>
1863300068	1907330068	330273	RUSHE SONALI DILIP		<input type="text"/>
1863300069	1907330069	330273	CHUTE BHARTI PREMLAL		<input type="text"/>
1863300070	1907330070	330273	MESHARAM PALLAVI KUWARLAL		<input type="text"/>
1863300071	1907330071	330273	BAHEKAR ANJALIBAI BHUMESHWAR		<input type="text"/>
1863300072	1907330072	330273	CHAWAKE ARCHANA MITARAM		<input type="text"/>
1863300073	1907330073	330273	UKEY DEVESHWARI RAJARAM		<input type="text"/>

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

Supervisor

Exam Center In-Charge

Notice :

- 1) Student must check his course, seat no etc before sign.
- 2) Any Correction in student information should be immediately reported to concerned district office, in prescribe format by exam center In-charge

Maharashtra State Board Of Vocational Examinations, Mumbai
Attendance Sheet

Center Code & Name : 330273 PUSHPA GARMENT MANUFACTURING AND FASHION
Examination : July 2019 **Date :** 19/08/2019 **Time :** 10 AM (For 100
Course Code & Name : 410204 GARMENT MANUFACTURING & FASHION DESIGNING
Subject : LADIES & GENTS FASHION GARMENT 41020423 PRACTICAL

Name Of Supervisor :

Enrolment No.	Seat No.	Institute	Name Of Student	Photo	Signature
1863300074	1907330074	330273	SHIWANKAR SHILA YADORAO		<input type="text"/>
1863300075	1907330075	330273	BISEN RITA ULHASRAO		<input type="text"/>
1863300076	1907330076	330273	BISEN GITA ULHASRAO		<input type="text"/>
1863300077	1907330077	330273	BAWANTHADE REENA OMPRAKASH		<input type="text"/>
1863300078	1907330078	330273	BAHEKAR KIRAN SUBHASH		<input type="text"/>
1863300079	1907330079	330273	NEWARE NIRASHA SHYAMLAL		<input type="text"/>
1863300080	1907330080	330273	HATTIMARE PRITI BHUMESHWAR		<input type="text"/>
1863300081	1907330081	330273	MANKAR VAMANRAO TILAKCHAND		<input type="text"/>

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

Supervisor

Exam Center In-Charge





Notice :

- 1) Student must check his course, seat no etc before sign.
- 2) Any Correction in student information should be immediately reported to concerned district office, in prescribe format by exam center In-charge

Maharashtra State Board Of Vocational Examinations, Mumbai
Attendance Sheet

Center Code & Name : 330296 SMILE VOCATIONAL TRAINING CENTER
Examination : July 2019 **Date :** 19/08/2019 **Time :** 10 AM (For 100
Course Code & Name : 201234 ELECTRO HOMEOPATHY
Subject : PHARMACY OF ELECTRO-HOMOEOPATHY 20123422 PRACTICAL

Name Of Supervisor :

Enrolment No.	Seat No.	Institute	Name Of Student	Photo	Signature
1863300082	1907330082	330296	BHARNE BHOJRAM MAROTIRAW		<input type="text"/>
1863300083	1907330083	330296	BAGHELE NANDKISHOR MANGAL		<input type="text"/>
1863300084	1907330084	330296	BISEN KEWALCHAND JAGANNATH		<input type="text"/>
1863300085	1907330085	330296	BISEN RAJEEV JEEYALAL		<input type="text"/>
1863300086	1907330086	330296	CHAUDHARI DEVENDRAKUMAR URAKUDA		<input type="text"/>
1863300087	1907330087	330296	CHOUDHAREE OMPRAKASH NARAYAN		<input type="text"/>
1863300088	1907330088	330296	CHIKHLONDE VASUDEO HARILAL		<input type="text"/>
1863300089	1907330089	330296	CHOUDHARI DURGAPRASAD MOHANLAL		<input type="text"/>
1863300090	1907330090	330296	DESHMUKH CHANDRODAY RUKMAGANDH		<input type="text"/>
1863300091	1907330091	330296	HARINKHEDE YOGESHKUMAR NARAYAN		<input type="text"/>
1863300092	1907330092	330296	HARINKHEDE DAYANAND SHRIRAM		<input type="text"/>

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

Supervisor

Exam Center In-Charge












Notice :

- 1) Student must check his course, seat no etc before sign.
- 2) Any Correction in student information should be immediately reported to concerned district office, in prescribe format by exam center In-charge

Maharashtra State Board Of Vocational Examinations, Mumbai
Attendance Sheet

Center Code & Name : 330296 SMILE VOCATIONAL TRAINING CENTER
Examination : July 2019 **Date :** 19/08/2019 **Time :** 10 AM (For 100
Course Code & Name : 201234 ELECTRO HOMEOPATHY
Subject : PHARMACY OF ELECTRO-HOMOEOPATHY 20123422 PRACTICAL

Name Of Supervisor :

Enrolment No.	Seat No.	Institute	Name Of Student	Photo	Signature
1863300093	1907330093	330296	PARDHI CHETANKUMAR DIPCHAND		<input type="text"/>
1863300094	1907330094	330296	PATLE VIDYADEVI LIKHIRAM		<input type="text"/>
1863300095	1907330095	330296	PATLE VILASKUMAR AMRUTLAL		<input type="text"/>
1863300096	1907330096	330296	RAUT NITESH HIRALAL		<input type="text"/>
1863300097	1907330097	330296	RAHANGDALE DILESH JAYKRUSHNA		<input type="text"/>
1863300098	1907330098	330296	RAHANGDALE AJAYKUMAR MALIKCHAND		<input type="text"/>
1863300099	1907330099	330296	HARINKHEDE NISHA JIWANLAL		<input type="text"/>
1863300100	1907330100	330296	SURYWANSHI TEJENDRA BABULAL		<input type="text"/>
1863300101	1907330101	330296	TIRELE SURESH SHRIRAM		<input type="text"/>
1863300102	1907330102	330296	TEMBHURNIKAR MANGESH SURESH		<input type="text"/>
1863300103	1907330103	330296	YEDE KRUSHNA PREMLAL		<input type="text"/>

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

Supervisor

Exam Center In-Charge




Notice :

- 1) Student must check his course, seat no etc before sign.
- 2) Any Correction in student information should be immediately reported to concerned district office, in prescribe format by exam center In-charge

Maharashtra State Board Of Vocational Examinations, Mumbai
Attendance Sheet

Center Code & Name : 330296 SMILE VOCATIONAL TRAINING CENTER
Examination : July 2019 **Date :** 19/08/2019 **Time :** 10 AM (For 100
Course Code & Name : 201234 ELECTRO HOMEOPATHY
Subject : PHARMACY OF ELECTRO-HOMOEOPATHY 20123422 PRACTICAL

Name Of Supervisor :

Enrolment No.	Seat No.	Institute	Name Of Student	Photo	Signature
1863300104	1907330104	330296	YELE TUMESHKUMAR NILKANTH		<input type="text"/>
1863300105	1907330105	330296	SHENDE JAGADISH GOBARI		<input type="text"/>
1863300106	1907330106	330296	BOPCHE SUSHIL MOTILAL		<input type="text"/>

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

Supervisor

Exam Center In-Charge



Notice :

- 1) Student must check his course, seat no etc before sign.
- 2) Any Correction in student information should be immediately reported to concerned district office, in prescribe format by exam center In-charge

Maharashtra State Board Of Vocational Examinations, Mumbai
Attendance Sheet

Center Code & Name : 330296 SMILE VOCATIONAL TRAINING CENTER
Examination : July 2019 **Date :** 17/08/2019 **Time :** 10 AM (For 100
Course Code & Name : 201234 ELECTRO HOMEOPATHY
Subject : PRACTICE OF ELECTROPATHY REMEDIES 20123421 PRACTICAL

Name Of Supervisor :

Enrolment No.	Seat No.	Institute	Name Of Student	Photo	Signature
1863300082	1907330082	330296	BHARNE BHOJRAM MAROTIRAW		<input type="text"/>
1863300083	1907330083	330296	BAGHELE NANDKISHOR MANGAL		<input type="text"/>
1863300084	1907330084	330296	BISEN KEWALCHAND JAGANNATH		<input type="text"/>
1863300085	1907330085	330296	BISEN RAJEEV JEEYALAL		<input type="text"/>
1863300086	1907330086	330296	CHAUDHARI DEVENDRAKUMAR URAKUDA		<input type="text"/>
1863300087	1907330087	330296	CHOUDHAREE OMPRAKASH NARAYAN		<input type="text"/>
1863300088	1907330088	330296	CHIKHLONDE VASUDEO HARILAL		<input type="text"/>
1863300089	1907330089	330296	CHOUDHARI DURGAPRASAD MOHANLAL		<input type="text"/>
1863300090	1907330090	330296	DESHMUKH CHANDRODAY RUKMAGANDH		<input type="text"/>
1863300091	1907330091	330296	HARINKHEDE YOGESHKUMAR NARAYAN		<input type="text"/>
1863300092	1907330092	330296	HARINKHEDE DAYANAND SHRIRAM		<input type="text"/>

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

Supervisor

Exam Center In-Charge












Notice :

- 1) Student must check his course, seat no etc before sign.
- 2) Any Correction in student information should be immediately reported to concerned district office, in prescribe format by exam center In-charge

Maharashtra State Board Of Vocational Examinations, Mumbai
Attendance Sheet

Center Code & Name : 330296 SMILE VOCATIONAL TRAINING CENTER
Examination : July 2019 **Date :** 17/08/2019 **Time :** 10 AM (For 100
Course Code & Name : 201234 ELECTRO HOMEOPATHY
Subject : PRACTICE OF ELECTROPATHY REMEDIES 20123421 PRACTICAL

Name Of Supervisor :

Enrolment No.	Seat No.	Institute	Name Of Student	Photo	Signature
1863300093	1907330093	330296	PARDHI CHETANKUMAR DIPCHAND		<input type="text"/>
1863300094	1907330094	330296	PATLE VIDYADEVI LIKHIRAM		<input type="text"/>
1863300095	1907330095	330296	PATLE VILASKUMAR AMRUTLAL		<input type="text"/>
1863300096	1907330096	330296	RAUT NITESH HIRALAL		<input type="text"/>
1863300097	1907330097	330296	RAHANGDALE DILESH JAYKRUSHNA		<input type="text"/>
1863300098	1907330098	330296	RAHANGDALE AJAYKUMAR MALIKCHAND		<input type="text"/>
1863300099	1907330099	330296	HARINKHEDE NISHA JIWANLAL		<input type="text"/>
1863300100	1907330100	330296	SURYWANSHI TEJENDRA BABULAL		<input type="text"/>
1863300101	1907330101	330296	TIRELE SURESH SHRIRAM		<input type="text"/>
1863300102	1907330102	330296	TEMBHURNIKAR MANGESH SURESH		<input type="text"/>
1863300103	1907330103	330296	YEDE KRUSHNA PREMLAL		<input type="text"/>

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

Supervisor

Exam Center In-Charge




Notice :

- 1) Student must check his course, seat no etc before sign.
- 2) Any Correction in student information should be immediately reported to concerned district office, in prescribe format by exam center In-charge

Maharashtra State Board Of Vocational Examinations, Mumbai
Attendance Sheet

Center Code & Name : 330296 SMILE VOCATIONAL TRAINING CENTER
Examination : July 2019 **Date :** 17/08/2019 **Time :** 10 AM (For 100
Course Code & Name : 201234 ELECTRO HOMEOPATHY
Subject : PRACTICE OF ELECTROPATHY REMEDIES 20123421 PRACTICAL

Name Of Supervisor :

Enrolment No.	Seat No.	Institute	Name Of Student	Photo	Signature
1863300104	1907330104	330296	YELE TUMESHKUMAR NILKANTH		<input type="text"/>
1863300105	1907330105	330296	SHENDE JAGADISH GOBARI		<input type="text"/>
1863300106	1907330106	330296	BOPCHE SUSHIL MOTILAL		<input type="text"/>

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

Supervisor

Exam Center In-Charge







Notice :

- 1) Student must check his course, seat no etc before sign.
- 2) Any Correction in student information should be immediately reported to concerned district office, in prescribe format by exam center In-charge

Maharashtra State Board Of Vocational Examinations, Mumbai
Attendance Sheet

Center Code & Name : 330298 PARVATI VYAVSAY PRASHIKSHAN KENDRA
Examination : July 2019 **Date :** 16/08/2019 **Time :** 10 AM (For 100
Course Code & Name : 304202 CONSTRUCTION SUPERVISOR
Subject : CONSTRUCTION PRACTICES 30420221 PRACTICAL

Name Of Supervisor :

Enrolment No.	Seat No.	Institute	Name Of Student	Photo	Signature
1763300143	1907330129	330298	SHAHARE ROHINI ROSAN		<input type="text"/>
1763300157	1907330130	330298	NANDGAYE RAHUL TULARAM		<input type="text"/>
1763300158	1907330132	330298	JANBANDHU RAHUL NARENDRA		<input type="text"/>
1663300148	1907330135	330298	MASARAM OMKANTA DEOCHAND		<input type="text"/>
1763300154	1907330136	330298	PATLE VIRENDRAKUMAR ANUPKUMAR		<input type="text"/>
1663300142	1907330137	330298	RAHANGDALE SANJAYKUMAR		<input type="text"/>

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

Supervisor

Exam Center In-Charge







Notice :

- 1) Student must check his course, seat no etc before sign.
- 2) Any Correction in student information should be immediately reported to concerned district office, in prescribe format by exam center In-charge

Maharashtra State Board Of Vocational Examinations, Mumbai
Attendance Sheet

Center Code & Name : 330298 PARVATI VYAVSAY PRASHIKSHAN KENDRA
Examination : July 2019 **Date :** 17/08/2019 **Time :** 10 AM (For 100
Course Code & Name : 304202 CONSTRUCTION SUPERVISOR
Subject : SURVEYING AND LEVELING 30420222 PRACTICAL

Name Of Supervisor :

Enrolment No.	Seat No.	Institute	Name Of Student	Photo	Signature
1763300143	1907330129	330298	SHAHARE ROHINI ROSAN		<input type="text"/>
1763300157	1907330130	330298	NANDGAYE RAHUL TULARAM		<input type="text"/>
1763300158	1907330132	330298	JANBANDHU RAHUL NARENDRA		<input type="text"/>
1663300148	1907330135	330298	MASARAM OMKANTA DEOCHAND		<input type="text"/>
1763300154	1907330136	330298	PATLE VIRENDRAKUMAR ANUPKUMAR		<input type="text"/>
1663300142	1907330137	330298	RAHANGDALE SANJAYKUMAR		<input type="text"/>

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

Supervisor

Exam Center In-Charge












Notice :

- 1) Student must check his course, seat no etc before sign.
- 2) Any Correction in student information should be immediately reported to concerned district office, in prescribe format by exam center In-charge

Maharashtra State Board Of Vocational Examinations, Mumbai
Attendance Sheet

Center Code & Name : 330300 BHAVIKA VOCATIONAL TRAINING CENTER
Examination : July 2019 **Date :** 16/08/2019 **Time :** 10 AM (For 100
Course Code & Name : 304202 CONSTRUCTION SUPERVISOR
Subject : CONSTRUCTION PRACTICES 30420221 PRACTICAL

Name Of Supervisor :

Enrolment No.	Seat No.	Institute	Name Of Student	Photo	Signature
1863300107	1907330107	330300	TIRPUDE BASENDRA BALAKDAS		<input type="text"/>
1863300108	1907330108	330300	RAMTEKE KAVITA RAJARAM		<input type="text"/>
1863300109	1907330109	330300	UKEY TEJASWINA PAWANKUMAR		<input type="text"/>
1863300110	1907330110	330300	GAJBHIYE VINOD SUKHARAM		<input type="text"/>
1863300111	1907330111	330300	UKEY VINAMRA PAWANKUMAR		<input type="text"/>
1863300112	1907330112	330300	PATLE YOGESHWAR SUKHDEO		<input type="text"/>
1863300113	1907330113	330300	BISEN UMESH BHASKAR		<input type="text"/>
1863300114	1907330114	330300	BHOYAR RAJJU CHHAGANLAL		<input type="text"/>
1863300115	1907330115	330300	CHODHARI RAJKUMAR CHHOTELAL		<input type="text"/>
1863300116	1907330116	330300	BISEN RAJENDRA TOIRAM		<input type="text"/>
1763300166	1907330138	330300	RAHANGDALE KOMAL ISHWARDAS		<input type="text"/>

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

Supervisor

Exam Center In-Charge












Notice :

- 1) Student must check his course, seat no etc before sign.
- 2) Any Correction in student information should be immediately reported to concerned district office, in prescribe format by exam center In-charge

Maharashtra State Board Of Vocational Examinations, Mumbai
Attendance Sheet

Center Code & Name : 330300 BHAVIKA VOCATIONAL TRAINING CENTER
Examination : July 2019 **Date :** 17/08/2019 **Time :** 10 AM (For 100
Course Code & Name : 304202 CONSTRUCTION SUPERVISOR
Subject : SURVEYING AND LEVELING 30420222 PRACTICAL

Name Of Supervisor :

Enrolment No.	Seat No.	Institute	Name Of Student	Photo	Signature
1863300107	1907330107	330300	TIRPUDE BASENDRA BALAKDAS		<input type="text"/>
1863300108	1907330108	330300	RAMTEKE KAVITA RAJARAM		<input type="text"/>
1863300109	1907330109	330300	UKEY TEJASWINA PAWANKUMAR		<input type="text"/>
1863300110	1907330110	330300	GAJBHIYE VINOD SUKHARAM		<input type="text"/>
1863300111	1907330111	330300	UKEY VINAMRA PAWANKUMAR		<input type="text"/>
1863300112	1907330112	330300	PATLE YOGESHWAR SUKHDEO		<input type="text"/>
1863300113	1907330113	330300	BISEN UMESH BHASKAR		<input type="text"/>
1863300114	1907330114	330300	BHOYAR RAJJU CHHAGANLAL		<input type="text"/>
1863300115	1907330115	330300	CHODHARI RAJKUMAR CHHOTELAL		<input type="text"/>
1863300116	1907330116	330300	BISEN RAJENDRA TOIRAM		<input type="text"/>
1763300166	1907330138	330300	RAHANGDALE KOMAL ISHWARDAS		<input type="text"/>

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

Supervisor

Exam Center In-Charge

Notice :

- 1) Student must check his course, seat no etc before sign.
- 2) Any Correction in student information should be immediately reported to concerned district office, in prescribe format by exam center In-charge