









NAAN MUDHALVAN ODD SEMESTER ARTS AND SCIENCE IMPLEMENTATION

ATTENDANCE SHEET

Day 7 - Session . II

DATE: \$ 9 24.

FROM TIME: 1-80 pm TO TIME: 3.30pm.

NAME OF THE TRAINING PARTNER	TAMIL NADU APEX SKILL DEVELOPMENT CENTER FOR HEALTHCARE
NAME OF THE COURSE	GOOD MANUFACTURING PRACTICES - QUALITY ASSURANCE - TNASDC HEALTH (02425)
NAME OF THE UNIVERSITY	MANONMANIAM SUNDARANAR UNIVERSITY
NAME OF THE COLLEGE	KAMARAJ COLLEGE
NAME OF THE DISTRICT	THOOTHUKUDI
NUMBER OF STUDENTS MAPPED BY NM	59
NUMBER OF STUDENTS PRESENT	55
NAME OF THE TRAINER	J. GOLDA ARPUTHO MACOR
SIGN OF THE TRAINER	Caltalle
NAME OF THE EDP FACULTY	Dr.G. RAGUKUMD12
SIGN OF THE EDP FACULTY	9 Mar Ar
NAME OF THE SPOC	Dr. C. KOSTHURI
SIGNATURE OF THE SPOC	Dr. C. KOSTHURI
COLLEGE PRINCIPAL SEAL AND SIGNATURE	

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