









## NAAN MUDHALVAN ODD SEMESTER ARTS AND SCIENCE IMPLEMENTATION ATTENDANCE SHEET

DATE: 23/8/2024

FROM TIME: 9:30 am TO TIME: 1:30 pm

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	BHARATHIDASAN UNIVERSITY
NAME OF THE COLLEGE	GOVT ARTS COLLEGE, ARIYALUR
NAME OF THE DISTRICT	ARIYALUR
NUMBER OF STUDENTS MAPPED BY NM	40
NUMBER OF STUDENTS PRESENT	36
NAME OF THE TRAINER	S. KEERTHIKA
SIGN OF THE TRAINER	Sneetly.
NAME OF THE EDP FACULTY	Dr. S. BALASUBAAMANIPAN
SIGN OF THE EDP FACULTY	gratulat UM
NAME OF THE SPOC	Dr. K. RAJASEKAR
SIGNATURE OF THE SPOC	Wzajnomm
COLLEGE PRINCIPAL SEAL AND SIGNATURE	ONRES 25/24

முதல்வர் भार कळागढं डकंकुमारी (दिकका-1) அரியலூர்-621 713

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