## **GUNOTSAV ASSAM - 2025**DEPARTMENT OF SCHOOL EDUCATION, GOVERNMENT OF ASSAM (ATTENDANCE SHEET OF STUDENTS)

1110		CTUDENT ID	CTUDENT MARKE	INITIOINI /	GEDIEG				
SR	₹.			MEDIUM /	TEST BOOKLE	PRESEN	IT / ABSENT		
CL	.ASS :-					L			
SCHOOL UDISE CODE AND NAME :-									
CLUSTER CODE AND NAME :-									
BL	OCK C	CODE AND NAME	t <del>-</del>						
DI:	STRIC	T CODE AND NAME	t <del>-</del>			Γ			

SCHO	OL UDISE CODE AND NA	AME :-					
CLASS:-				L			
SR. NO.	STUDENT ID	STUDENT NAME	MEDIUM / OMR SHEET NO.	TEST BOOKLET SERIES (A/B/C)	DAY-1 INTERNAL (Self Evaluation)	DAY-2 EX	
1				ABC ABC	P A Present Absent	P Present	
2				ABC ABC	P A Present Absent	P Present	
3				ABC ABC	P A Present Absent	P Present	
4				ABC ABC	P A Present Absent	P Present	
5				ABC ABC	P A Present Absent	P Present	
6				ABC ABC	P A Present Absent	P Present	
7				ABC ABC	P A Present Absent	P Present	
8				ABC ABC	P A Present Absent	P Present	
9				ABC ABC	P A Present Absent	P Present	
10				ABC ABC	P A Present Absent	P Present	
11				ABC ABC	P A Present Absent	P Present	
12				ABC ABC	P A Present Absent	P Present	
13				ABC ABC	P A Present Absent	P Present	
14				ABC ABC	P A Present Absent	P Present	
15				ABC ABC	P A Present Absent	P Present	
16				ABC ABC	P A Present Absent	P Present	
17				ABC ABC	P (A) Present Absent	P Present	
18				ABC ABC	P A Present Absent	P Present	
19				ABC ABC	P (A) Present Absent	P Present	
20				ABC ABC	P A Present Absent	Present	

19		ABC ABC	P Present	A Absent	P Present	A Absent
20		ABC ABC	P Present	A Absent	P Present	A Absent
SIGNATURE OF EXTERNAL EVALUATOR	SIGNATURE OF	HEAD TEACHE	₹			