FORM NO. VI

MUSTER

Name of Establishment Department of Botany : Value Added Course

SERIAL No.	NAME	FATHER'S/ HUSBAND'S NAME	SEX	NATURE OF WORK	DATE OF ENTRY INTO SERVICE
1	Fiya JA		F		
2	Ansil P.A.		M		
3	Nivya K.P.		F		
4	Somanya K.S.		F		
5	Etna Bivera.		F		
6	Sanin Jose.		F		
7	Safna. P.M.		F		
8	Binitha. M.		F		
9	Ashwathy Menon.		F		
10	Mariam ~~Menon~~ Jacob.		F		
11	Shilpa T.P.		F		
12	Kavya Ramesh.		F		
13	Misriya. M.H.		F		
14	Desela. P.P.		F		
15	Sreelakshmi. V		F		
16	Jasina George.		F		
17.	Athira C.S.		F		

Course Co-ordinator:
Dr. Jose John

SACRED HEART COLLEGE (AUTONOMOUS) DEPARTMENT OF BOTANY THEVARA, KOCHI-682 013

RULE 29 (5)

16BOTVAC02

ROLL

For The Period Ending

Place:

Cultivation of Edible Fungi

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Remarks
16/9/16	17/9/16	18/9/16	19/9/16	20/9/16.																											
✓	✓	✓	✓	a																											
✓	–	✓	✓	✓																											
✓	✗	✓	✓	✓																											
✓	✓	a	✓	✓																											
✓	✓	✓	✓	✓																											
✓	✓	✓	✓	✓																											
✓	✓	✓	✓	✓																											
✓	✓	✓	✓	✓																											
✓	✓	✓	✓	✓																											
✓	✓	✓	✓	✓																											
✓	✓	✓	✓	✓																											
✓	✓	✓	✓	✓																											
✓	✓	✓	✓	✓																											
✓	✓	✓	✓	✓																											
✓	✓	a	✓	a																											
✓	✓	✓	✓	✓																											
✓	✓	a	✓	✓																											
✗	✗	✗	✗	✗																											