

DEPARTMENT OF COMMERCE
SACRED HEART COLLEGE, THEVARA

INTERNSHIP ATTENDANCE REPORT

Day	Date	Signature of Intern
1	3/4/2017	[Signature]
2	4/4/2017	[Signature]
3	5/4/2017	[Signature]
4	6/4/2017	[Signature]
5	7/4/2017	[Signature]
6	8/4/2017	[Signature]
7	10/4/2017	[Signature]
8	11/4/2017	[Signature]
9	12/4/2017	[Signature]
10	13/4/2017	[Signature]
11	15/4/2017	[Signature]
12	17/4/2017	[Signature]
13	18/4/2017	[Signature]
14	19/4/2017	[Signature]
15	20/4/2017	[Signature]
16	21/4/2017	[Signature]
17	22/4/2017	[Signature]
18	23/4/2017	[Signature]
19	25/4/2017	[Signature]
20	26/4/2017	[Signature]
21	27/4/2017	[Signature]
22	28/4/2017	[Signature]
23	29/4/2017	[Signature]
24	2/5/2017	[Signature]
25	3/5/2017	[Signature]
26		
27		
28		
29		
30		

DECLARATION

Certified that Ms/Mr. Lilly John has successfully completed 25 days of internship in our institution.

Place : Thevara

Date : 4/5/2017

(Seal & Signature of the Institution)

