**JEREMIAH NYAGAH NATIONAL POLYTECHNIC (JNNP)**

0140149P

**CONTINUOUSASSESSMENT MARKS SHEETS PER UNIT OF COMPETENCY**

**COURSE CODE:…………………….** **COURSE TITLE**:………………………………………………………………..

**UNIT CODE**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **UNIT TITLE**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ASSESSMENT SERIES:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

| S/N | **Reg Code** | **Candidate’s Name** | **Theory Marks (100%)** | | | | **Practical Marks (100%)** | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **CAT 1** | **CAT 2** | **CAT 3** | **AVERAGE** | **PRACT 1** | **PRACT 2** | **PRACT 3** | **AVERAGE** |
|  | 15466 | Dennis Mwenda Kiarii |  |  |  |  |  |  |  |  |
|  | 15146 | Brenda W. Mwendwa |  |  |  |  |  |  |  |  |
|  | 15349 | Rose Kalondu Njue |  |  |  |  |  |  |  |  |
|  | 15278 | Evalyne Watugi Nyagah |  |  |  |  |  |  |  |  |
|  | 15085 | Jacinta Muthoni Gitari |  |  |  |  |  |  |  |  |
|  | 15005 | Mark Katheru Mutharimi |  |  |  |  |  |  |  |  |
|  | 15002 | Kariuki Antony Njeru |  |  |  |  |  |  |  |  |
|  | 15001 | Karuga David Gitonga |  |  |  |  |  |  |  |  |
|  | 15000 | Gloria Ndimu Mutua |  |  |  |  |  |  |  |  |
|  | 14998 | Julius Malombe Kithusi |  |  |  |  |  |  |  |  |
|  | 14991 | Rose Wambui Nguru |  |  |  |  |  |  |  |  |
|  | 14990 | Wycliff Nyagah Njagi |  |  |  |  |  |  |  |  |
|  | 14986 | Anthony Kioko Kitavi |  |  |  |  |  |  |  |  |
|  | 14985 | Musha Njoroge Njagi |  |  |  |  |  |  |  |  |
|  | 14915 | Dennis Macharia Kimongo |  |  |  |  |  |  |  |  |
|  | 14844 | Vivian Auma Wandera |  |  |  |  |  |  |  |  |
|  | 13865 | Billy Simon Mutegi Nyaga |  |  |  |  |  |  |  |  |
|  | 13852 | Bashir N. Mohammed |  |  |  |  |  |  |  |  |

**NB:** *CAT1, 2, 3 or PRACT1, 2, 3 is applicable ONLY where the trainees were assessed more than once in a particular unit of competency and if you have more than three assessments insert another column.*

Name of Internal Assessor……………………………………………………..Sign:……………………..Date……………..

Verified by H.O.D.……………………………………………………..Signature…………………….Date……………

STAMP