



STUDENT LAB REPORT SHEET (DEPARTMENT OF COMPUTER APPLICATIONS)

Name of Student

Mob. No Email.....

Address Permanent.....

Local Address.....

Father's Name.....Mob. No.....

Occupation.....

Mother's NameMob. No.....

Occupation.....



S. No.	Practical	DOP	DOS	Grade Viva	Grade Report	10	Student's Signature	Teacher's Signature
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								
17								
18								
19								
20								

S. No.	Practical	DOP	DOS	Grade Viva	Grade Report	10	Student's Signature	Teacher's Signature
21								
22								
23								
24								
25								
26								
27								
28								
29								
30								
31								
32								
33								
34								
35								
36								
37								
38								
39								
40								

Total No. of Practical allotted.....

Percentage Attendance of Practical.....

Total No. of Practical completed.....