**KiTE**

**KGiSL Institute of Technology**

**Coimbatore – 641 035**

(Approved by AICTE & Affiliated to Anna University)

**NAME : ………………………………..**

**REG. No. : ………………………………..**

**COURSE : III Year - B.Tech (I.T)**

**IT6611**

**MOBILE APPLICATION DEVELOPMENT**

**LABORATORY**

**KGiSL Institute of Technology - KiTE**

**Coimbatore – 641 035.**

(Approved by AICTE & Affiliated to Anna University)

**MOBILE APPLICATION DEVELOPMENT**

**LABORATORY**

**Name :**

**Class :** III Year - B.Tech (Information Technology)

**UNIVERSITY REGISTER NUMBER**

This is to Certify that, this is a bonafide records of work done by ………….…….…………of **III year B.Tech (I.T)** in **MOBILE APPLICATION DEVELOPMENT LABORATORY** during the **VIth Semester** of the academic year 2017 - 2018.

**FACULTY HEAD OF THE DEPARTMENT**

Submitted during Anna University Practical Examination held on ………….……. at **KGiSL Institute of Technology**, Coimbatore – 641 035.

**INTERNAL EXAMINER EXTERNAL EXAMINER**

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