



The Heritage Institution
KANYA MAHA VIDYALAYA, JALANDHAR
(AUTONOMOUS)
AFFILIATED TO GURU NANAK DEV UNIVERSITY, AMRITSAR
Practical Examination Details

Session: _____

Month: _____ Year _____

Name of Department: _____

| Sr. No. | Programme | Semester | Course Title | Course Code | No. of Students | Group/s | Date and Session (Mor/Eve) of Examination | Name, Designation of Internal Examiner and Teacher ID | Name, Designation of External / Main Examiner and E-Mail ID | Experience of Main Examiner* | Institute of External Examiner |
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*The faculty member who is not teaching the concerned course, in which practical is being conducted will act as the Main/ External Examiner.

Name and Full Signatures HoD/Dean

Date: _____

Mobile No. _____