**JAMAL MOHAMED COLLEGE (AUTONOMOUS)**

**TIRUCHIRAPPALLI-620 020**

**VALUE ADDED COURSES – 2024**

**ATTENDANCE SHEET**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Name of the Department** | | |  | | | | | |
| **Class** | | |  | | | | | |
| **Name of the Value Added Course** | | |  | | | | | |
| **Course Code** | | |  | | | | | |
| **S.No.** | **Reg. No.** | **Name of the Student** | **Signature of the Student** | | | | | |
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**Signature of the HOD Signature of the Faculty Member**

**JAMAL MOHAMED COLLEGE (AUTONOMOUS)**

**TIRUCHIRAPPALLI-620 020**

**VALUE ADDED COURSES - 2024**

**REMUNERATION VOUCHER**

**Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (AIDED / SF - MEN / SF - WOMEN)**

**Class: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| --- | --- | --- | --- | --- | --- |
| **S.No.** | **Name of the Faculty Member** | **No. of**  **Hours**  **taken** | **Total**  **Amount**  **Received**  **(Per Hour Rs.150/-)** | **JMC Salary A/c No.** | **Signature** |
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| **Total** | |  |  |  | |

**Signature of the HOD with Date**