BHARATHIAR UNIVERSITY : COIMBATORE – 641 046

Centre for Participatory Programmes

Practical Examination Mark Sheet

Month & Year of Examination :

Partner Institution/College Name : **Centre Code** :

Course & Branch :

Subject Code : **Semester** :

Subject Name :

Name of the Examiners : **Internal Examiner** :

External Examiner :

Maximum Mark:

Sl. No.	Register No.	Name of the candidate	Practical/Project External Marks	Marks in Words