B.A. ..... Semester ,2025

Department of .....

Marangi Mahavidyalaya (Golaghat)

INTERNSHIP

Paper Code:

Credit: 4

Name of the Student:

Name of the Supervisor:

Name and Address of the Enterprise;

Name:

Address:

Mobile Number (owner/Manager):

Attendance Sheet
(120 Hours)

Day. No.	Date	Time In	Time Out	Signature of the Owner/Manager	Signature of the Supervisor	Remarks

Attendance Sheet
(120 Hours)

Day. No.	Date	Time In	Time Out	Signature of the Owner/Manager	Signature of the Supervisor	Remarks