

Tribhuvan University
Faculty of Education, Office of the Dean
External Pratical Mark Slip
BICTE Program

Examination Year :

Campus Name :

Practical Date:

Subject code :

Semester:

Subject Name:

FM: 20 PM: 10

S.N	Name	Roll no	Evaluation Criteria			Total [20]	In Word	Rem
			Record Book [4]	Practical Work [10]	Viva [6]			
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								
17								
18								

External

Name:

Designation:

Campus:

Mobile number:

Tribhuvan University
Faculty of Education, Office of the Dean
Attendance Sheet
BICTE Program

Examination Year :

Campus Name :

Practical Date:

Subject code :

Semester:

Subject Name:

S.N	Name	Roll no	Signature	Answer Sheet	Remarks
1					
2					
3					
4					
5					
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7					
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10					
11					
12					
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14					
15					
16					
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18					

Internal/HOD

Name:

Designation:

Campus:

Mobile number:

External

Name:

Designation:

Campus:

Mobile number:

Campus Seal