

INDUSTRIAL TRAINING DEPARTMENT . KERALA

PROGRESS CARD

Name of I T I:		PHOTO
Name of Trainee:	Trade:	
Admn. No.	Date of admission:	
Aadhar No:	MIS Reg. No.	
Educational Qualification:	Trainee's Phone No:	
Name of Guardian:	Guardian's Phone No:	
Address:		

FIRST / SECOND YEAR

	Month	Attendance					Monthly Tests						Initials of instructor	Initials of GI	Initials of VP/PRL	Signature of Guardian	
		Possible	Present	Cum. Possible	Cum. Present	Percentage	Prof. skill	Prof. knowledge	Engg. Drg.	WCS	ES	Total					
H1	Aug																
	Sept.																
	Oct.																
	Nov.																
	Dec.																
	Jan.																
H2	Feb.																
	Mar																
	April																
	May																
	June																
	July																

HALF YEARLY ASSESSMENT

	Attendance			Formative Assessment (100)	Conduct (V.good, Good, Average)	Sig. of Trainee	Sig. of Instr.	Sig. of GI	Sig. of VP/PRL
	Poss.	Pre.	%						
H1									
H2									

PRINCIPAL