

CANDIDATE ATTENDANCE SHEET

Name of AA: INVIGILATE	Project / Scheme : TNSDC
Batch ID : B2025/015/4282-5336	Job role: Assistant Beauty Therapist
Date of Assessment: 09/04/2026	Training Partner: The Modern Educational and Social Service Society
Candidate Assigned : 30 Candidate Appeared :	Center Address: Tamil_Nadu

S.No	Candidate ID	Candidate Name	Gender	Aadhar Number	Signature
1.	CB2025-F362523	Nithya M			
2.	CL2025-F362011	Shoba			
3.	CL2025-F362579	Prathiksha			
4.	CL2025-F362656	Afreen Begum			
5.	CL2025-F362727	Aarthy P			
6.	CL2025-F363963	Rosema Parveen J			
7.	CL2025-F363969	Ananthi Nagaraj			
8.	CL2025-F363980	PAVITHA			
9.	CL2025-F363983	Rabinya Geja			
10.	CL2025-F363988	K Youvasri			
11.	CL2025-F364002	Jeevitha			
12.	CL2025-F364005	Mathanya			
13.	CL2025-F364008	Sifaya			

14.	CL2025-F364021	Keerthana S			
15.	CL2025-F364027	Gomathi			
16.	CL2025-F364028	Hema			
17.	CL2025-F364031	Vishnu Priya A			
18.	CL2025-F364039	Sumathi			
19.	CL2025-F364223	Varsha			
20.	CL2025-F364247	Vijayalakshmi			
21.	CL2025-F364258	Nithya Perumal			
22.	CL2025-F364527	Anbulatha Karthick			
23.	CL2025-F364697	Subashini			
24.	CL2025-F364700	Shafrina Begum M			
25.	CL2025-F364717	NIVETHA			
26.	CL2025-F364768	Saranya			
27.	CL2025-F364774	Rajashree R			
28.	CL2025-F365037	Ezhilarasi			
29.	CL2025-F366038	Nirmaladevi R			
30.	CL2025-F372069	Pradeepa Sankar			

Name of the Assessor:

Signature of the Assessor:

Office seal -Assessment Agency:

Name of the Center Head:

Signature of the center Head:

Office seal-Training Center:

INVIGILATE VTP FEEDBACK FORM

VTP NAME	: The Modern Educational and Social Service Society
CONTACT NUMBER	:
DATE OF ASSESSMENT	: 09/04/2026
ADDRESS	: Tamil_Nadu
BATCH ID / NO. OF CANDIDATES	: B2025/015/4282-5336 /30
JOB ROLE	: Assistant Beauty Therapist

Please give your honest feedback				
Remarks	Tick on any one:			
1. Were candidates intimated before and were on time for assessment?	<input type="radio"/> Yes	<input type="radio"/> No		
2. Has assessor reached on time?	<input type="radio"/> Yes	<input type="radio"/> No		
3. Was Assessment conducted on time and as per the guidelines?	<input type="radio"/> Yes	<input type="radio"/> No		
4. Was there any issue with the assessment?	<input type="radio"/> Yes	<input type="radio"/> No		
5. Was the equipment required for assessment in working condition?	<input type="radio"/> Yes	<input type="radio"/> No		
6. How would you rate the assessment procedure?	<input type="radio"/> Excellent	<input type="radio"/> Good	<input type="radio"/> Average	<input type="radio"/> Poor
Does the testing center complies to the following Acts : "Fire & Safety""Child Labour""Drugs & Cosmetics""Electricity" "Food Safety & Standards""RTI""Weight & Measures" Wherever applicable? <input type="radio"/> Yes <input type="radio"/> No				

I hereby confirm that, the exam conducted by assessor have followed all the guidelines and was well mannered. Assessor have not demanded any favour in cash or any kind to complete the assessments deputed by INVIGILATE®. We are aware that the result of the batch is purely based on the merit of the students.

Name of Authorized Person :

Sign & Seal of Authorized Person :