



Department of \_\_\_\_\_

Summary Sheet : Theory Subject      Academic Year: \_\_\_\_\_ Class: \_\_\_\_\_ Sem: \_\_\_\_\_

Subject: \_\_\_\_\_      Course Code: \_\_\_\_\_

Name of student: \_\_\_\_\_      Roll No: \_\_\_\_\_

Sr. No.	Title	PageNo.	Date of Performance	Grade	Signature of Faculty
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
15.	<b>Internal Assessment (Out of 10 Marks)</b>				
16.	<b>Term Test 1 (Out of 30 Marks)</b>				
17.	<b>Term Test 2 (Out of 30 Marks)</b>				
18.	<b>Test Marks Average (Out of 30 Marks)</b>				



Department of \_\_\_\_\_

**Summary Sheet Laboratory work** Academic Year: \_\_\_\_\_ Class: \_\_\_\_\_ Sem: \_\_\_\_\_

Subject: \_\_\_\_\_ Course code: \_\_\_\_\_

Performance Indicator	Participation (5)	Organization and Preparation (5)	Accuracy and Neatness of journal (5)	Time Management and Punctuality (5)	Total (20)
Exp_1/ Assignment					
Exp_2/ Assignment					
Exp_3/ Assignment					
Exp_4/ Assignment					
Exp_5/ Assignment					
Exp_6/ Assignment					
Exp_7/ Assignment					
Exp_8/ Assignment					
Exp_9/ Assignment					
Exp_10/Assignment					
Exp_11/Assignment					
Exp_12/Assignment					
Exp_13/Assignment					
Exp_14/Assignment					
Exp_15/Assignment					
<b>Average</b>					

*Grades: A-Excellent (18-20), B- Good (13-17), C-Basic (6-12), D-Unacceptable (1-5)*

**Term Work and Internal Assessment Certification**

This is to certify that Mr. / Miss: \_\_\_\_\_ Seat No: \_\_\_\_\_ Class/Div: \_\_\_\_\_ of Branch: \_\_\_\_\_ has completed the specified internal assessment and term work in subject: \_\_\_\_\_ Subject Code: \_\_\_\_\_ K. J. Somaiya Institute of Technology, Sion(E) as required by the University of Mumbai during the academic year 20\_--20\_. His / Her performance is found to be: \_\_\_\_\_ (enter grade).

\_\_\_\_\_  
**Faculty Incharge**

\_\_\_\_\_  
**HOD**