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**STUDENT PARTICIPATION DETAILS**

Department of......................................

....................................... College

(Applicable for Departmental MoU)

Today on ...................as part of the MoU signed in between the department of.........................

...................................College and the department of ......................................................................College, a total of ..............number of students of B.A/B.Com/MA.....................Semester has participated in the program organised by..........................................................................................................................................on the Topic/Event.......................................................................................................................................on ................

The name and number of the participants that attended the programme is attached herewith:

Convenor/ Resource Person Signature of HoD

Dr./Mr./Ms....................................

Dr./Mr./Ms......................................

HoD/Associate/Assistant Professor

Department of.................................

...............................College

Signature, Coordinator, IQAC

**Name & Signature of the students**

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| --- | --- | --- |
| **Sl.No** | **Name of the Student** | **Signature** |
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Signature of IQAC

Signature of Principal