**BHAILALBHAI & BHIKHABHAI INSTITUTE OF TECHNOLOGY, V.V.NAGAR (performa A-2-b)**

**laboratory work complition aknowledgement**

**(REQUIRED to BE submitTED to HOD by the End of Academic Term along with laboratory planning duly filled)**

**nAME OF department:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**nAME OF STAFF MEMBERs:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**NAME OF SUBJECT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_SUBJECT CODE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**nUMBER OF practical ALLOTED PER WEEK AS PER TIME TABLE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DIVISION: \_\_\_\_\_ Academic Term : From\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_to\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**BATCH ALLOCATION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Here with , I/we acknowledge that as per Laboratory planning for the Subject, Division and term mention above, the Practical work as per curriculum is completed by \_\_\_\_\_\_\_\_\_\_% .**

**As per deviation stated in Laboratory planning, I/we have arranged extra practical classes as per the details given below.**

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| **Sr. No.** | **Date of Extra Practical Classes** | **Name of the practical** |
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 **(Name of Staff Members with Signature & Date of Acknowledgement to HOD)**