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This is certified that Mr./Ms	TAANVI	
	- 17 191-000-00-191	

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S/D/o. Sh. DASWANT

of S.O. COLLEGE, BARMALA	has successfully undergone Training Course	HB
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a hardworking & innovative individual.

We wish him/Her a very bright and prosperous future.

From 18 24N. 2024 to 18 APRIL 2024. During the tenure of the above course, we found him/her

Managina Directo

Technisor Head

Gertifficerte

Chandigarh : 0171 4567888, 9023400888, 96460 00952 Bothinda : 0164 50070

: 0164 5007088, 90235 00888, 90236 00888









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This is certified that Mr./Ms. SAPNA UERMA

S/D/o. Sh. DILEEP VERMA

of S.O. COLLEGE, BARNALA

has successfully undergone Training Course_____HR

a hardworking & innovative individual.

We wish him/her a very bright and prosperous future.

From 18 DAN 2024 to 18 APR. 2024 . During the tenure of the above course, we found him/he



Managina Director

Technicallea

diant : 0171 4567888 9023400888, 96460 0095

07088, 90235 00888, 90236 00888





2024 During the tenure of the above course, we found him/her





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Gertifficate

This is certified that Mr./Ms	RUCHI	S/D/o. Sh. MAKHAN LAL

of S.D. COLLEGE, BARNALA has successfully undergone Training Course HR

a hardworking & innovative individual.

We wish him/her a very bright and prosperous future.



From 18 DAN 2024 to 18 APR





Chandigarh: 0171 4567888, 9023400888, 96460 00952 Bathinda: 0164 5007088, 90235 00888, 90236 00888









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S/D/o. Sh. CHANDER SHENHAR

This is certified that Mr./Ms.

of S.D. COLLEGE, BARNACA has successfully undergone Training Course.

From 18th DAN. 2024 to 18th APRIL 2024. During the tenure of the above course, we found him/her a hardworking & innovative individual.

We wish him/her a very bright and prosperous future.

Chandigarh: 0171 4567888, 9023400888, 96460 00952

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of S.D. COLLEGE, BARNALA has successfully undergone Training Course

From 15 DAN 2024 to 20th APRIL 2024. During the tenure of the above course, we found him/hé a hardworking & innovative individual.

We wish him/her a very bright and prosperous future.





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TO WHOM IT MAY CONCERN

KHUSHBOO

SDOHIRA LAL BANSAL

HOLL NO HEREL NO 300 508 OF SD COLLEGE BARNALA

SIX MONTH Industrial Software Training in MARKETING

Jan, 2014. May, 2024. His her conduct is found satisfactory during the training and

we wish him her good luck for the bright future.

Opposite-ICICI Bank, Leela Bhawan, Patiala-147001 (Punjah) Contact: +91-78371-12184, 78371-12149 Website: proceegroup.com | E-mail: proceeinfotech06@gmail.com









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of S.D. COUEGE, BARNACA has successfully undergone Training Course 118

From 18" DAN. 2024 to 18" APR. 2024 During the tenure of the above course, we found him/he

a hardworking & innovative individual.

We wish him/her a very bright and prosperous future.







Chandigarh: 0171 4567888, 9023400888, 96460 00952 Barhinda: 0164 5007088, 90235 00888, 90236 00888









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This is certified that Mr./Ms	HARPREET	KAUR	S/D/o. Sh	SEWA	SWAH	
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of S.D. COLLEGE, BARNALA has successfully undergone Training Course HR

From 15 AN. 2024 to 20 APRIL 2024. During the tenure of the above course, we found him/her

a hardworking & innovative individual.

We wish him/her a very bright and prosperous future.





Managing Director

Chandigarh: 0171 4567888, 9023400888, 96460 00952 Bathinda: 0164 5007088, 90235 00888, 90236 00888









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Certificate

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AML 2024. During the tenure of the above course, we found him/her

of S.D. COLLEGE BARNACA has successfully undergone Training Course DIGITAL

a hardworking & innovative individual.

We wish him/her a very bright and prosperous future.



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Bathinda : 0164 5007088, 90235 00888, 90236 00888

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has successfully undergone Training Course MARKETING

From 15 DAN 2024 to 20th APR . 2024 During the tenure of the above course, we found him/her

a hardworking & innovative individual.

We wish him/her a very bright and prosperous future.



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of S.D. COLLEGE, BARNALA has successfully undergone Training Course HE

From 18th 2AN. 2024 to 18th APA. 2024. During the tenure of the above course, we found him/her

a hardworking & innovative individual.

We wish him/her a very bright and prosperous future.







Chandigarh: 0171 4567888, 9023400888, 96460 00952 Bathinda: 0164 5007088, 90235 00888, 90236 00888







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Certificate

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Gertifficate

This is certified that Mr./Ms. BHAWANDEE

S/D/o. Sh. JAGDEET SINGH

of S.D. COLLEGE, BARNALA has successfully undergone Training Course MARKETING

From 15 DAN. 2024 to 204 APRIL 2024. During the tenure of the above course, we found him/her

a hardworking & innovative individual.

We wish him/her a very bright and prosperous future.







Chendigarh: 0171 4567888t 9023400888, 96460 00952

Bothinda |: 0164 5007088, 90235 00888, 90234 00888









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Gertifficate

This is certified that Mr./Ms. BEERPAL KAUR

S/D/o. Sh. KEWAL SINGH

of S.D. COLLEGE, BARNACA has successfully undergone Training Course MARKETING

From 15 OAN. 2024 to 2014 APRIL 2014. During the tenure of the above course, we found him/her

a hardworking & innovative individual.

We wish him/her a very bright and prosperous future.

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Chandigarh: 0171 4567888, 9023400888, 96460 00952 Bathinda: 0164 5007088, 90235 00888, 90236 00688









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Gertifficate

This is certified that Mr./Ms. AKRIN SINGH

_S/D/o. Sh. JAI SING!

of S.D. COLLEGE, BARNALA has successfully undergone Training Course HR

a hardworking & innovative individual.

We wish him/her a very bright and prosperous future.

From 18th 24N. 2024 to 18th ARR. 2024 During the tenure of the above course, we found him/her





Technis Read

Chandigarh: 0171 4567888, 9023400888, 96460 00952

Bathinda : 0164 5007088, 90235 00888, 90236 00888









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Certificate

This is certified that Mr./Ms.

has successfully undergone Training Course MARKETING

During the tenure of the above course, we found him

a hardworking & innovative individual

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and prosperous future.

Managing Director

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This is certified that Mr./Ms.

of S.D. COLLEGE, BARNACA has successfully undergone Training Course MARKETING

From 15 DAN. 2024 to 20th APRIL, 2024. During the tenure of the above course, we found him/her

a hardworking & innovative individual.

We wish him/her a very bright and prosperous future.



Managing Director

Chandigarh: 0171 4567888, 9023400888, 96460 00952

Bathinda: 0164 5007088, 90235 00888, 90236 00888









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Gentificate

This is certified that Mr./Ms.

S/D/o. Sh. SURINDER

of S.D. COLLEGE, BARNACA has successfully undergone Training Course MARKETING

From 15th DAN 2024 to 20th APR. 2024. During the tenure of the above course, we found him/her

a hardworking & innovative individual.

We wish kim/her a very bright and prosperous future.



Managing Director

Chandigarh: 0171 4567888, 9023400888, 96460 00952

Bathinda : 0164 5007088, 90235 00888, 90236 00888







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Certificate

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This is certified that Mr./Ms.	AUTIAL	RAWAT
this is certified that Mr./Ms.	NITIN	KHINIT

S/D/o. Sh. DANN SINGH RAMAT

of S.D. COUESE, BARNAUA has successfully undergone Training Course_

HR

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From 18 DAN 2024 to 18 APRIL 2024. During the tenure of the above course, we found him/her

a hardworking & innovative individual.

We wish him/her a very bright and prosperous future.

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Managing Director

Chandigarh: 0171 4567888, 9023400888, 96460 00952

Bathinda: 0164 5007088, 90235 00888, 90236 00888

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This is certified that Mr./Ms	KARAMUEER	SINGH	S/D/o. Sh. GURDEEP	SINGH
THE RESERVE ASSESSMENT OF STATE STATES AND ADDRESS.				

of S.D. COLLEGE BARNAUA has successfully undergone Training Course HR

From 01 0AN. 2024 to 2379 APR. 2024. During the tenure of the above course, we found him/her

a hardworking & innovative individual.

We wish him/her a very bright and prosperous future.

Technol Head



Managing Director

Chandigarh: 0171 4567888, 9023400888, 96460 00952

Bothinda : 0164 5007088, 90235 00888, 90236 00888







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Certificate

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Certifficate

S/D/o. Sh. ANIL KUMAR

of S.D. COLLEGE, BARNACA has successfully undergone Training Course

From 15th DAN 2024 to 20th APR. 2024. During the tenure of the above course, we found him/her

a hardworking & innovative individual.

We wish him/her a very bright and prosperous future.

Managing Director

Chandigarh: 0171 4567888, 9023400888, 96460 00952

Bathinda: 0164 5007088, 90235 00888, 90236 00888







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of S.D. COUEGE, BARNAUA has successfully undergone Training Course DIGITAL MARKETING

From 26 DAN. 2024 to 224 APR. 2024 During the tenure of the above course, we found him/her

a hardworking & innovative individual.

We wish him/her a very bright and prosperous future.



Managing Director

Chandigarh: 0171 4567888, 9023400888, 96460 00952

Bathindo : 0164 5007088, 90235 00888, 90236 00888









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Certificate

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Training

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Certifficate

This is certified that Mr./Ms. HARRY BANJAL

S/D/o. Sh. DIWAN CHAND BANSAL

of S.D. COURGE, BANNACA has successfully undergone Training Course MARKETING

From 15" DAN 2024 to 20" APR. 2024. During the tenure of the above course, we found him/her

a hardworking & innovative individual.

We wish him/her a very bright and prosperous future.

Technikar Head



Managing Director

Chandigarh: 0171 4567888, 9023400888, 96460 00952 Bathinda: 0164 5007088, 90235 00888, 90236 00888









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This is certified that Mr./Mi.

of S.D. COLLEGE, BARNALA

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2024 During the tenure of the above course, we found him/her

a hardworking & innovative individual.

We wish him/her a very bright and prosperous future.

Managing Director

Chandigarh: 0171 4567888, 9023400888, 96460 00952

Bothinda: 0164 5007088, 90235 00888, 90236 00888

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E-mail: info@infowig.co.in

Certificate

No. INFOIDIZ EM 2024 SO

This is certified that Mr./Ms. GOORAV GOVAL

of S.D. COLLEGE, BARNACA has successfully undergone Training Course_

From 15th DAN 2024 to 20th APR. 2024. During the tenure of the above course, we found him/her

a hardworking & innovative individual.

We wish him/her a very bright and prosperous future.



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Certifficate

This is certified that Mr./Ms. CHETAN SINGLA

S/D/o. Sh. RAKESH KUMAR

of S.D. COLLEGE, BARNALA has successfully undergone Training Course MARKETINGE

From 18th DAN. 2024 to 18th APRIL 2024. During the tenure of the above course, we found him/her a hardworking & innovative individual.

We wish him/her a very bright and prosperous future.







Chandigarh: 0171 4567888, 9023400888, 96460 00952 Bathinda: 0164 5007088, 90235 00888, 90236 00888







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No INFOWER SMOOTH 69

This is certified that Mr./Ms.

Vraining

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ANGAD KUMAP

S/D/o. S

NATH

of S.D. COUEGE, BARNALA has successfully undergone Training Course

HR

From 15th DAN 2024 to 20th APR. 2024. During the tenure of the above course

a hardworking & innovative individual,

We wish him/her a very bright and prosperous future.



Managing Director

Chandigarh: 0171 4567888, 9023400888, 96460 00952

Bathinda: 0164 5007088, 90235 00888, 90236 00888







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Web.: www.infowiz.co.in

E-mail: info@infowiz.co.in

Certificate

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Training

DEEPAM This is certified that Mr./Ms._

S/D/o. Sh. YADVINDER

of S.D. COLLEGE, BARNACA has successfully undergone Training Course MARKETING

From 15 DAN. 2024 to 20th APRIL 2024. During the tenure of the above course, we found him/her

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Managing Director

4567888, 9023400888, 96460 00952

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This is certified that Mr./Ms	HARPLEET	SINGH	S/D/o. Sh	SHER	SINGH
of S.D. COLLEGE, BARI	NACA has successful	lly undergone Tr	raining Course	HR	
From 1st DAN 2024 to_	23rd APPUL 202	<u>L4</u> . During the	tenure of the abov	e course,	we found him/her
a hardworking & innovative ind	ividual.				
•	We wish him/her a w	ery bright and p	rosperous future.		





Managing Director

Chandigarh: 0171 4567888, 9023400888, 96460 00952

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Bathinda: 0164 5007088, 90235 00888, 90236 00888



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This certificate has been awarded to Mr Davinder Mittal from SD College, Barnala who has undertaken an internship program of 6 Months from 05/01/2024 to 05/07/2024 in Python Department from Solitaire Infosys Pvt. Ltd.

During the tenure of this internship with us, we found the candidate selfstarter and hardworking. Also he had worked sincerely on the assignments and his performance was satisfactory to be part of the team.

We wish the Candidate success for all the future endeavors.

For Solitaire Infosys Pvt. Ltd. infy slinfy slinfy slinfy slinfy slinfy

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Human Resources Department Inty slinty

Note: To check the authentication of certificate, please visit www.slinfy.com



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S.No. 420927

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This certificate has been awarded to Ms Ramanpreet Kaur from SD College, Barnala who has undertaken an internship program of 6 Months from 05/01/2024 to 05/07/2024 in Python Department from Solitaire Infosys Pvt. Ltd.

During the tenure of this internship with us, we found the candidate selfstarter and hardworking. Also she had worked sincerely on the assignments and her performance was satisfactory to be part of the team.

We wish the Candidate success for all the future endeavors. Success for all the future endeavors.

For Solitaire Infosys Pvt. Ltd. infy slinfy slinfy slinfy slinfy slinfy



Human Resources Department linfy slinfy slinfy

Note: To check the authentication of certificate, please visit www.slinfy.com



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S. No. 420272

Certificate of Training

This ce	rtificate has been	awarded to	Mr./Ms. Knuchbneet kour
from	Sp College,	Bannala	who has undertaken
an inter	nship program of	6Menths	from 05-01-2024 10 05- 07-2024
in_Net	wanking	_ Departme	nt from Solitaire Infosys Pvt. Ltd.

During the tenure of this internship with us, we found the candidate self-starter and hardworking Also, he/she had worked sincerely on the assignments and his/her performance was satisfactory to be part of the team.

We wish the candidate success for all the future endeavors.

For Solitaire Infosys Pvt. Ltd.

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Human Resources Department.

Note: To check the authentication of certificate: please visit www.slinfy.com





Regn. No. Sω/3859/ BVoc/24

Certificate Of Training

This is To Certify That

Mr./Ms. RAMANDEEP KAUR C/O Mr./Ms. PARDEEP SINGH

Has Successfully Completed Industrial Training

In FULL STACK DEVELOPMENT

From 1JANUARY 2024 TO 25APRIL 2024

Conducted At Softwizz Technologies Pvt. Ltd.





Education Specialist

HR Manager

Address: - Street No. 18, Ajit Road, Bathinda Ph. 98885-05377, 90416-24206 www.softwizz.in, E-mail - info@softwizz.in

NIM QUIZ

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Web.: www.infowiz.co.in

Certificate

No Informa 6Hapay 5328

This is certified that Mr./Ms. Chamandeep Singh Gill 5/D/o. Sh. (Layon 2: 1 Singh Gill

of SD Callage Barrala has successfully undergone Training Course Digital Marketing

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From O8" Jan. 2024 to O8" July 2024. During the tenure of the above course, we found him/her

a hardworking & innovative individual.

We wish him/her a very bright and prosperous future.



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Certificate

No Informa 6HOODE 5327

This is certified that Mr./Ms.

of SD Collage, Sarnally

S/D/o. Sh. Manoj Kumas Gray

has successfully undergone Training Course Destal Marketing

From O8" Jan, 2024 to O8" July 2024. During the tenure of the above course, we found him/her

a hardworking & innovative individual.

We wish him/her a very bright and prosperous future.







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Bathinda : 0164 5007088, 90235 00888, 90236 00888



S.No. 420926

Certificate of Training

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This certificate has been awarded to Mr Puneet Bansal from SD College, Barnala who has undertaken an internship program of 6 Months from 05/01/2024 to 05/07/2024 in Python Department from Solitaire Infosys Pvt. Ltd.

During the tenure of this internship with us, we found the candidate selfstarter and hardworking. Also he had worked sincerely on the assignments and his performance was satisfactory to be part of the team.

We wish the Candidate success for all the future endeavors.

For Solitaire Infosys Pvt. Ltd. infy slinfy slinfy slinfy slinfy slinfy

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Human Resources Department Inty slinty

Note: To check the authentication of certificate, please visit www.slinfy.com



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H.O.: SCO 8 120, Sector 34 CHANDIGARH

First Floor, 8 규 Road, BATHINDA

Web.: www.infowiz.co.in E-mail: info@infowiz.co.in

has

successfully undergone

Training

Course

This is certified that Mr./Ms

Peop During the tenure 今 the above course, we found him,

hardworking & innovative individual

×e wish him/ her a very bright and prosperous future.



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arh: 0172 4567888, 98761 13887, 90231 00888

Bathinda: 0164 5007088, 90235 00888, 90236 00888

Training Certificate of





EXCELLENCE

B.O.: First Floor, Crown Tower, 100 Ft. Road, BATHINDA H.O.: SCO 118 - 120, Sector 34 - A, CHANDIGARH

Web.: www.infowiz.co.in

E-mail: info@infowiz.co.in

<u>-ertificate</u>

No. INFORMED M 2024 1843

This is certified that Mr./Ms. USHAR SINGLA \$/D/o. Sh.

NARINDER

of S.D. COLLEGE BARNAUA has successfully undergone Training Course SOFTWARE DEVELOPMENT

From Of JAN. 2024 to 25th APRIL 2024. During the tenure of the above our

ound him/her

a hardworking & innovative individual.

We wish him/her a very bright and prosperous hiture







Chandigarh: 0171 4567888, 9023400888, 96460 00952

Bathinda: 0164 5007088, 90235 00888, 90236 00888



Regd. Under Ministry of Corporate Affairs & An ISO 9001:2015 Certified Company

Regn. No. SW 3865 BVOC 24

Certificate Of Training

This is To Certify That

Mr./Ms. RUBY DEVI C/O Mr./Ms. BUTTA SINGH

Has Successfully Completed Industrial Training

In FULL STACK DEVELOPMENT

From 1 JANUARY 2024 TO 25 APRIL 2024

Conducted At Softwizz Technologies Pvt. Ltd.







Education Specialist

A WHINDA

HR Manager

Address:- Street No. 18, Ajit Road, Bathinda Ph. 98885-05377, 90416-24206 www.softwizz.in, E-mail - info@softwizz.in



S. No. 441857

Certificate of Training

		n awarded to Mr./Ms.	Tanisha
from_	SD College	, Barnala	who has undertaken
an inte	rnship program o	of 6 Months from 9	-Jan-20240 01-July-2024
in he	Destoning		Solitaire Infosys Pvt. Ltd.
	3 3		•

During the tenure of this internship with us, we found the candidate self-starter and hardworking. Also, he/she had worked sincerely on the assignments and his/her performance was satisfactory to be part of the team.

We wish the candidate success for all the future endeavors.

For Solitaire Infosys Pvt.,Ltd.

Human Resquices Department.

Note: To check the authentication of certificate, please visit www.slinfy.com.





S.No. 420928

Certificate of Training

This certificate has been awarded to Ms Rajni Rani from SD College,

Barnala who has undertaken an internship program of 6 Months from

05/01/2024 to 05/07/2024 in Python Department from Solitaire Infosys

Pvt. Ltd.

During the tenure of this internship with us, we found the candidate selfstarter and hardworking. Also she had worked sincerely on the assignments and her performance was satisfactory to be part of the team.

We wish the Candidate success for all the future endeavors. The sling sl

For Solitaire Infosys Pvt. Ltd. Infy slinfy slinfy slinfy slinfy slinfy



Human Resources Department linky slinky slinky

Note: To check the authentication of certificate, please visit www.slinfy.com



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S.No. 420853

Certificate of Training

This certificate has been awarded to Mr Sharanjeet Kaur from SD

College, Barnala who has undertaken an internship program of

6 Months from 01/01/2024 to 01/07/2024 in PHP Department from
Solitaire Infosys Pvt. Ltd.

During the tenure of this internship with us, we found the candidate selfstarter and hardworking. Also he had worked sincerely on the assignments and his performance was satisfactory to be part of the team.

We wish the Candidate success for all the future endeavors.

For Solitaire Infosys Pvt. Ltd.

Gagar Samuel

Human Resources Department

Note: To check the authentication of certificate, please visit www.slinfy.com





S. No. 441504

Certificate of Training

This certificate has been awarded to Mr./Ms. Auchdelp Singh from SD college, Barnala who has undertaken an internship program of 6 Months from 10/01/2024 to 29/06/2024 in Lython full Stack Department from Solitaire Infosys Pvt. Ltd.

During the tenure of this internship with us, we found the candidate self-starter and hardworking. Also, he/she had worked sincerely on the assignments and his/her performance was satisfactory to be part of the team.

We wish the candidate success for all the future endeavors.

For Solitaire Infosys Pvt. 4td.

Human Resources Department.

Note: To check the authentication of certificate: please visit www.slinfy.com





S.No. 420904

Certificate of Training

This certificate has been awarded to Mr Dilpreet Singh from SD

College, Barnala who has undertaken an internship program of 6

Months from 05/01/2024 to 05/07/2024 in Python Department from Solitaire Infosys Pvt. Ltd.

During the tenure of this internship with us, we found the candidate selfstarter and hardworking. Also he had worked sincerely on the assignments and his performance was satisfactory to be part of the team.

We wish the Candidate success for all the future endeavors.

For Solitaire Infosys Pvt. Ltd.

Gagar San /

Human Resources Department

Note: To check the authentication of certificate, please visit www.slinfy.com



PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIST

	SECTION I		Y
This form has been issued	vande Vanda	Kumas	
Regd.No. [14-2023-1	07) Son of /daughter of Sh	Jagder S.D. Colies	,
trice produced carde	aire perore me mat he/ane	Jagde v S.P. Golie 30 ja6 s entitled to receive the Pra y, Patiala, under the rules from	cricat
Date	Vander	00	1
	Nodal Officer B Voc (MLMDT) Section II	S.D. College, BAR	MALA
· Vaush kuma		elor Ershu computer	1800
(Name of Student)	(Name of Trainer) ne of the Hospital / Labora	tory) as my trainer for the a	shove
		1 Jones	
0 111	Section III	Student	
(Name of Trainer) Him/her training facilities acquire:-	t	trainee and I agree to give	may
2. Practical Experience in,	ecessing and preservation. en in clinical laboratory s. of various samples.	linical laboratory.	
MANAGER - COLONIA DE CONTRACTO	1		
I also agree that a trained	d technologist shall be assigne	Rebert 19. Suida	e
	Section IV	(Apprentice Master) Name and address EISHU COMPUTERTS	
I certify thatVCLMS	hhas	LABORATORY undergone .18.0 hours trains enumerated in section III	ining
		Rolcon & Jarol	
	Section V	EISHU COMPUTERTS	ED
I certify that Volume practical training as per of from UGC New Delhi.	rdinances framed by Punjabi	completed A BORATORY his University, Patiala, under the	/her rules
Date 01:08:24	Vandar	20	Ca
	Nodal Officer B Voc (MLMDT)	S.D.College, Barn	ala

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIST



S.D.College, Barnala

		Prin
*****	SECTION I	S.D. College, with
This form has been issued to	b Mr./Ms.	-
Regd.No. 114-2023-10	193 Son of /daughter of Sh	Bhajan single
Who has produced evidence		entitled to receive the Practical Patiala, under the rules from UGC
Date 01 . 01 - 24	Vandor	0
batteriquina.mi	Nodal Officer	Principal Princip
	B Voc (MLMDT)	S.D. College, Barnala S.D. College, BARNAL
	Section II	
(Name	(Name of Trainer) of the Hospital / Laborator and respect him/her during the	of Elstin Comparterise ry) as my trainer for the above e entire period of my training.
		Student
	Section III	
(Name of Trainer) (rainee and I agree to give uring his/her training he/she may
1. Working knowledge of ke	eeping of records related to clin	nical laboratory.
Practical Experience in, a) Sample collection, proceed by Precautions to be taken c) Hematological analysis of Biochemical analysis of e) Microbiological analysis	essing and preservation. in clinical laboratory various samples.	
I also agree that a trained	technologist shall be assigned	Robert 18. Sinder
		(Apprentice Master)
		EISHU COMPUTERTSED
	Section IV	LABORATORY
I certify thatHayi	ths in accordance with details	undergone
	1	Release K. Sidal
	Section V	HEISAU'COMPUTERTSED
I certify that . Howit practical training as per or from UGC New Delhi.	has ordinances framed by Punjabi U	ompleted in all respect his/her Jniversity, Patiala, under the rules
Date 02:08:24	Mandon	00
Date	Nodal Officer	Principal

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGI

SECTION I	
This form has been issued to Mr./Ms. Kushan	Sumple S.D. Callana HANNA
This form has been issued to Mr./Ms. Kushan Regd.No. 114-2023-1071 Son of /daughter of S residing at Basnala State State Who has produced evidence before me that He/Sh	n. Baljit singtr
residing at Basnala State	unias
Who has produced evidence before me that He/Sh Training as per ordinances framed by Punjabi Univer New Delhi.	
Date Al:07:14 Nauda	
Nodal Officer	Principal @
B Voc (MLMDT)	S.D.College, Barbala
n Section II	
I. Kridhan Singh accept Learnen Konner	of A.M.C. LAR
(Name of Student) (Name of Traine	or)
training and agree to obey and respect him/her durin	g the entire period of my training.
	Krishan Sigh Student
Section III	
I Surreen trer accept Krisham Singh a	s a trainee and I agree to give
(Name of Trainer) (Name of Student) Him/her training facilities in my organization so the acquire:-	
1. Working knowledge of keeping of records related t	to clinical laboratory.
2. Practical Experience in,	
 a) Sample collection, processing and preservation. b) Precautions to be taken in clinical laboratory 	
 c) Hematological analysis. d) Biochemical analysis of various samples. 	
e) Microbiological analysis of samples.	
I also agree that a trained technologist shall be assi-	gned for his/her guidance.
	Di Vijk Market ovear Minish National
	(Apprentice Master) Name and address of Institution
Section IV	1141115 14118 14111 14111 14111
I couling that Krishan Singh	has proterrone 80 hours training
I certify that Kushan Singh spread over	talls enumerated in section III
	Dr. Virk Marvet Wear Hinleb National
	Head of the Training Institution
Section V	The state of the s
I certify that	as completed in all respect his/her abi University, Patiala, under the rules
Date 01:08:23	000
Nodal Officer	Principal
B Voc (MLMDT)	S.D.College, Barnala

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIS



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		SECTION I			Princip
This form has been	n issued to Mr./Ms	Daman	neet kan	S.D. College	BARNAL
Regd.No. 114-20	023-1078 son of	/daughter of Sh	. Harder	singh	
residing at	Barnala	State Pury	ias	0	
Who has produce	d evidence before dinances framed by	me that He/Ske	is entitled to	receive the li ler the rules fr	Practical om UGC
Date.6.3-6.7-2.9	Vande	N		0	0
	Nodal Off	icer		Principa	AND THE RESERVE OF THE PARTY OF
	B Voc (ML	MOT	8.	S.D.College, B	arnala
^		Section II			
Balanda agree	t Kaubccept M nt) (Name of the H to obey and respec	(Name of Trainer lospital / Labor t him/her during	of (x) (atory) as my the entire peri	Hospital trainer for the	e above
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		Section III		Studer	it
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1. Working knowle	edge of keeping of re	cords related to	clinical laborat	ory.	
	ence in, tion, processing and be taken in clinical			-	
c) Hematological	analysis.	The state of the s			
	nalysis of various sa Il analysis of sample				
e, meroprotegica	i analysis of sample	1			
I also agree that a	trained technologis	st shall be assign	ed for his/her	nuidance	
				rentice Master)	
				address of In	
		Section IV			
I certify thatDo	Smonths in acco	rdance with deta	as undergone . ils enumerated	ILO hours in section III	training
				Tower	man.
		Section V	Head of the	Training Institu	ed officer
	0 1	1 Li		#c Civil Hosp	ital Barnala

Date 04-08-24

Nodal Officer B Voc (MLMDT)

S.D.College, Barnala

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIS

	
CECTION I	0.6
This form has been issued to Mr./Ms. Haundly Si	Principa
Regd. No. 114-2019-357 son of /daughter of Sh. Bal	et single
residing at Barnala State Punjab Who has produced evidence before me that He/She/is entit Training as per ordinances framed by Punjabi University, Patial New Delhi.	led to receive the Practical a, under the rules from UGC
Date 03- 57-24 Vanda	00
Nodal Officer	Principal
B Voc (MLMDT)	8.50 68Heas, Baynala A LA
Section II	
1 Harinder Singh occept Ms. Pameri of	Civil Hanit. L
(Name of Student) (Name of Trainer) (Name of the Hospital / Laboratory) as training and agree to obey and respect him/her during the entire	my trainer for the above
Section III	Student
(Name of Trainer) (Name of Student) Him/her training facilities in my organization so that during hacquire:-	
Working knowledge of keeping of records related to clinical late. Practical Experience in, a) Sample collection, processing and preservation. b) Precautions to be taken in clinical laboratory.	aboratory.
c) Hematological analysis.	
d) Biochemical analysis of various samples. e) Microbiological analysis of samples.	1/
e) Microbiological analysis of samples.	
I also agree that a trained technologist shall be assigned for his	
	family 15
	(Apprentice Master)
Section IV	ne and address of Institution
I certify that Havi notes alingh has under spread over	gone .l.8.Q. hours training erated in section III
	Two nam
Head	of the Training Indicate Officer
Section V	₩c Civil Hospital Barnala
I certify that Haunder single has complete practical training as per ordinances framed by Punjabi Universification UGC New Delhi.	ted in all respect his/her sity, Patiala, under the rules
Date 04: 08-24	
Nodal Officer	Principal

B Voc (MLMDT)

Principal S.D.College, Barnala

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIST

This form has been less	section i Sukhpreet - loss son of /daughter of Sh. Co	Singly an College
This form has been issu	ed to Mr./Ms.	so comege, conserve
Regd.No. 119-2023	-(0)S Son of /daughter of Sh.	hand singer
who has produced (4v)	idence before me that He/She is disces framed by Punjabi University, Pa	nuclea to receive the Practical
Date 03 - 07 - 24	Mander	- 0
Detelorational	Nodal Officer	Principal
	B Voc (MLMDT)	S.D.College, Barnala
	Section II	S.D. College, SANNALA
(Name of Student) (N	thaccept Ms. Kamen of	as my trainer for the above
		Sulunpecial SI
	Section III	Student
(Name of Trainer) Him/her training facilit acquire:- 1. Working knowledge 2. Practical Experience a) Sample collection,	processing and preservation. aken in clinical laboratory lysis. is of various samples.	ng his/her training he/she may
I also agree that a trai	ned technologist shall be assigned for	r his/her guidance.
	Section IV	(Apprentice Master) Name and address of Institution
I certify that	months in accordance with details en	umerated in section III
		and and
	Section V	and of the Traising Jemiletical Officer We Civil Hospital Barnali
I certify that practical training as pe from UGC New Delhi.	SILKAPSELT Shykhas comer ordinances framed by Punjabi Uni	pleted in all respect his/her
Date.D.HD.S24	Mandon	
Date. D. T. T. D. T. T. Y	Nodal Officer	Principal
	B Voc (MLMDT)	S.D.College, Barnala

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIST

This form has been is:	SECTION I		8 4
		8.D.	Cottree
Regd.No	3-(086 Son of /daughter of Sh.	Satpal Ga	19
residing at fakh	o kalan state Pu	injab '	0
who has produced e	vidence before me that He/She inces framed by Punjabi Universit	is antitled to	the Practical ules from UGC
Date.0.30724	Vander		00
	Nodal Officer B Voc (MLMDT)		rincipal
	o voc (HEMD1)	S.D.Colle	ege, Barnala Principal
	Section II	S.D. College	BARNALA
1 Chahat	accept Ms. Kamey	or and Hospi	tal
(Name of Student)	(Name of Trainer)	The state of the s	
training and agree to o	Name of the Hospital / Labora obey and respect him/her during	tory) as my trainer for the entire period of my	or the above training.
		/	Charat.
	5	S	tudent
No he ?	Section III		
I. Manny ac	cept Chahat as a	trainee and I agree to	give
A commercial contract of a second contract of	(Name of Student) ities in my organization so that		
Working knowledge Practical Experience	of keeping of records related to o	linical laboratory.	
a) Sample collection,	processing and preservation	CHARLES OF A STATE OF THE STATE	
 b) Precautions to be t c) Hematological ana 	taken in clinical laboratory		
d) Biochemical analys	is of various samples		
e) Microbiological ana	alysis of samples.		
	1		
I also agree that a trai	ned technologist shall be assigne	d for his/her guidance.	MOTE
		(Apprentice Ma	(Nester)
	Castles W	Name and address	of Institution
01	Section IV		
I certify that	Months in accordance with details	undergone	ours training
			Carmin
	Section V	Head of the Taling	Medical Officer
T contifu that	Chalak		Hospital Barnala
I certify that practical training as pe from UGC New Delhi.	r ordinances framed by Punjabi	completed in all resp University, Patiala, und	ect his/her der the rules
Date 0.4:08-24	Vandor		0
water with Mari	Nodal Officer	_(U
	B Voc (MLMDT)	S.D.Collec	ge, Barnala
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PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGI

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ı	Principal-
ų.	BARNALA

	Princip
This form has been issued to Mr./Ms.	sahib Singh College BARNAL
2 1 1 1 1 2 2 2 2 1 59	G. 1: 1 0: -
Regd.No. 114-2023-1059son of /daughter	of sh. Gallwinder Sing
residing at <u>Basnala</u> State Who has produced evidence before me that He Training as per ordinances framed by Punjabi Uni New Delhi.	/She is entitled to receive the Practical versity, Patiala, under the rules from UGC
Date & Aug 2024 Nandar	
Nodal Officer	Principal
B Voc (MLMDT)	S.D.College, Barnala
Section I	Princ
Gulsahib Singh accept M. Kanna (Name of Studenty) (Name of Tr. (Name of the Hospital / Li training and agree to obey and respect him/her du	S.D. College, BARN S.D. College, BARN Hupitel aniner) aboratory) as my trainer for the above uring the entire period of my training.
	Gursalibsing
	Student
M. L. 2 C	
(Name of Trainer) (Name of Student) (Him/her training facilities in my organization so	
acquire:-	
1. Working knowledge of keeping of records relate 2. Practical Experience in, a) Sample collection, processing and preservation b) Precautions to be taken in clinical laboratory c) Hematological analysis. d) Biochemical analysis of various samples. e) Microbiological analysis of samples.	NAME OF THE OWNER O
Taleo agree that a testeral testeral action is	ALCO SELECTION OF THE SECOND S
I also agree that a trained technologist shall be as	(Apprentice Master)
Section I	Name and address of Institution
0.1 0.1	has undergone 180 hours training
	5 10
ing second	Head of the Training Institution
Section V	Head of the Training Institution
I certify that	has completed in all respect his/her njabi University, Patiala, under the rules
Date 8 Sep 2024 Vandon	A 0
Nodal Officer	Principal
B Voc (MLMDT)	S.D.College, Barnala

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIST

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curry as a single-	SECTIO	NI	0: 1	No.
This form has been issued to Mr./Ms		Sahit	Singh SI), Collage, SA
This form has been issued to Mr./Ms Regd.No. 114-2023-1061 Son eresiding at Bounds	of /daughter	of Sh.	quejant	Singly
residing at Bounals	State	Puni	06	0
Who has produced evidence before Training as per ordinances framed be New Delhi.	e me that H	lo/She is do	titlad to sami	to the December of
Date 8 . 8 . 24 Van	dor			
Nodal O				Principal
B Voc (N	ILMDT)		8.50.C	ollege, BARN
2 2	Section	II		
Sand (ingh accept M	1. Kamp	3	Civil Ho	toll-1
(Name of Student)	(Name of T	rainer)		pro-
training and agree to obey and respe	Hospital / ect him/her o	Laboratory) Juring the en	as my trainer tire period of n	for the above ny training.
				caril Sugar
				Student
10 1 2 1 3	Section	CIX		
MI. Kanny accept Sahi	1 Singh	as a train	ee and I agree	to give
(Hame of	Studente			
Him/her training facilities in my org acquire:-	janization so	that during	his/her traini	ng he/she may
Working knowledge of keeping of a 2. Practical Experience in, Sample collection, processing and b) Precautions to be taken in clinical c) Hematological analysis. Biochemical analysis of various s e) Microbiological analysis of sample.	d preservation I laboratory amples.	nn.	laboratory.	
	1			
I also agree that a trained technolog	ist shall be a	ssigned for I	nis/her guidand	amily I
			(Apprentice	Master)
	Section)	IV.	ime and addres	s of Institution
I certify that Sahil Singh			-0	
spread overR.D.Cmonths in acco	ordance with	has unde details enur	rgone .\X.f nerated in sect	hours training
			-	· we
		Head	of the Trainin	Institution ,
0 P · 1	Section	¥	- ਤੁ. ਸੀਨੀਅਰ	ASIGN MENS
I certify that	ramed by Pi	has comple unjabi Unive	eted in all re	espect his/her inder the rules
Date 8 9 24	2			
1 William	George		09	0
Nodal Of B Voc (MI			S.D.Col	lege, Barnala
				- March and an extended

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIS

D. College, BARI av Shukla
e the Practical rules from UGC
Principal ollege, Barnafacipal ollege, EARNAL
Mal
for the above ny training.
Shiyam Student
to give
ing he/she may
re famular
Master) ess of Institution
hours training
og ristitution
respect his/her under the rules
DR.

SEC	War Shukla S.D. College, BA
Regd.No. 117-2023-106 9 Son of /daug	ghter of Sh. Psem Kumas Shukla
residing at Barnala Stat	e & funials at He/She is/entitled to receive the Practical
Who has produced evidence before me th Training as per ordinances framed by Punja New Delhi.	bi University, Patiala, under the rules from UGC
Date 8. 8. 24 Naudan	00
Nodal Officer	Principal
B Voc (MLMDT)	S.D. College, Barnafacip
Sec	ction II
I Shivam Shutla accept MS. A R (Name of Student) (Name (Name of the Hospita training and agree to obey and respect him/	e of Trainer) I / Laboratory) as my trainer for the above
	Shivam
	Student
Sec	tion III
(Name of Trainer) (Name of Student Him/her training facilities in my organizati acquire:-	ickla as a trainee and I agree to give give to
Working knowledge of keeping of records Practical Experience in, Sample collection, processing and prese Precautions to be taken in clinical laboration. Hematological analysis. Biochemical analysis of various samples e) Microbiological analysis of samples.	ervation. atory
I also agree that a trained technologist sha	(Apprentice Master) Name and address of Institution
Se	ction IV
I certify that Shivam Shukla spread over	has undergone .l&Q hours training the with details enumerated in section III
	Turk
S.	Head of the Training Thistitution
I certify thatShivam Ahuk	Ahas completed in all respect his/her by Punjabi University, Patiala, under the rules
Date 8 9 24 Jander	00
Nodal Officer	#rmeital
B Voc (MLMDT)	S.D.College, Barnala

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIS

	SECTION I		
This form has been issued to Mr./Ms	Sukhdeep	Singh	2 D C
This form has been issued to Mr./Ms Regd.No. 114-2023-1046 Son of /	daughter of Sh.	Idewant	Single
Raynela	- /	1.106	
residing at Barnala Who has produced evidence before m Training as per ordinances framed by P New Delhi.	State / e that He/She unjabi Universi	is entitled to r ty, Patiala, unde	receive the Practical or the rules from UGC
Date 8.8.24 Vander			Ola
Nodal Offic			Principal morpal
B Voc (MLM	DT)	S.D.	College, BATTELLA
	Section II	-0 0.	
Such deep Sloyh accept Ms. Ballame of Skudent (Name of the Hottraining and agree to obey and respect	spital / Labora	acory) as my tr	amer to the above
			Student S
			Student
	Section III		
Ms. kemni accept Cuth de	ep lingh as	a trainee and I a	agree to give
Him/her training facilities in my organ acquire:-	ization so that	during his/her	training ne/site may
1. Working knowledge of keeping of rec 2. Practical Experience in, a) Sample collection, processing and p b) Precautions to be taken in clinical lac) Hematological analysis. d) Biochemical analysis of various same) Microbiological analysis of samples.	reservation. aboratory	clinical laborato	ry.
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I also agree that a trained technologist	100000000000000000000000000000000000000	(Appre	entice Master)
	Section IV		
I certify that Sukhamb Sing	2h dance with deta	as undergone nils enumerated i	hours training in section III
	Section V	Head of the T	raining Pristitution 8 JALIS 8 3700 all respect his/her
I certify that Swholeh Sing practical training as per ordinances from from UGC New Delhi.	hhas	completed in	mere a morting of trial trial
Date 8 . 9 . 24 Vander	/		DP.
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B Voc (MLN	IDT)		S.D.College, Barnala Principal

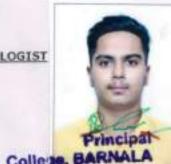
PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIST

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	SECTION I	le .	
This form has been issued to Mr./Ms.		The second secon	
Regd.No. 114 - 2023-1078on	of /daughter of S	n. Gurjen	der Singh
residing at Bathinda Who has produced evidence before Training as per ordinances framed by New Delhi.	me that He/Sh	e is entitled to	receive the Bractical
Date 1.8.24 Now	or .		-0
Nodal O	fficer		Principal cincipal
B Voc (M	LMDT)		S.D.College, BARNALA
	Section II	1.8). Conega, and
(Name of Student) (Name of the Itraining and agree to obey and respe	(Name of Trainer Hospital / Labor	r) ratory) as my tr	rainer for the above
			anviot kaux
			Navjot kaur Student
I. Kudeefilm accept Navig (Name of Trainer) (Name of S Him/her training facilities in my org acquire:-	Section III At Kaku as Student) Janization so that	a trainee and I a	gree to give training he/she may
Working knowledge of keeping of real street of the st	d preservation. I laboratory amples.	clinical laborato	ry.
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I certify that	Section IV	Name and a	omputerised Laboratory
I certify that	Section V has ramed by Punjab	Friends	Congularized Experiency all respect his her iala, under the rules
Nodal Of	ficer		Procinal
B Voc (MI			College, Barrala D. College, BARNALA

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOG

	SECTION I		
This form has been issued to Mr./Ms.	lovepriet	Singh	WITH A
This form has been issued to Mr./Ms. Regd.No. 114-2020-417-Son o	f /daughter of Sh.	Mohindro	College BANGLING
residing at Karam gash Who has produced evidence before Training as per ordinances framed by	State	j'ab	eive the Practical
New Delhi. Date. 1: 7: 24.	lul .		
Nodal Of	ficer		Pringipal
B Voc (Mi	CATTOON .	S.D.	College, Barnala incipal
2	Cartina TT d	1.6	L COHORA DADALALA
(Name of Student)	(Name of Trainer) fospital / Laborat	ory) as my train	L Computerized LA
training and agree to obey and respec	t him/her during t	he entire period of	my training.
			Student
1. 0	Section III		Student
I Kinger Singaccept Love (Name of Trainer) (Name of S	ARESALIAMAS a	trainee and I agre	e to give
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 b) Precautions to be taken in clinical c) Hematological analysis. d) Biochemical analysis of various sa 	imples.		
e) Microbiological analysis of sample	25,		
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I also agree that a trained technologi	st shall be assigne		ance.
		(Apprentic	The second second second
	Section IV		ress of Institution
I certify that Love PREST	info has	undergone 180	hours training
spread over	ordance with details	s enumerated in se	ection III
		Head of the Train	ing Institution
	Section V	Head of the Train	andour
I certify that	ramed by Punjabi	completed in all	respect his/her
Date 31.7.24	don		00/
Nodal Of			Pelncipal
B Voc (MI	LMDT)	S.D.	College, Barnaprincipal

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIST



	SECTION I	Company of the Compan	S.D. College, BARNAL
This form has been issued to Mr./Ms	Symer	sengh	бранска
Regd.No. 14-2013-1691 Son of	/daughter of	sh. Ha	represent singh branche
residing at Bauhala	State	Panigh	0
Who has produced evidence before Training as per ordinances framed by New Delhi.	me that He/	She is entitle	
Date 7:624 Nau	day		00
Nodal Of	-		Principal
B Voc (MI	MDT)		S.D.College, Barnala
	Section II		Princi
1 Agmen Limph Galcha accept Kl	Name of Trai	ngh or fri	ends. Lamputerised Jal
training and agree to obey and respec	lospital / La	boratory) as	
			Almer Singh
111111 00 100	Section III		
(Name of Trainer) (Name of S	tudent)		
Him/her training facilities in my orgacquire:-	anization so t	that during hi	s/her training he/she may
Working knowledge of keeping of r Practical Experience in, Sample collection, processing and Precautions to be taken in clinical	preservation		boratory.
c) Hematological analysis.			
 d) Biochemical analysis of various sa e) Microbiological analysis of sample 			
c) microningical analysis of sample	2		
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		Nam	riends Computerised Laboratory (Apprentice Master)
00 10	Section IV	1	kulder Swiss
I certify that	rdance with	details enume	one JERA hours training rated in section III
			riends Computerised Laboratory
I certify that flymes Lingh	Garcha.		ed in all respect his/her
practical training as per ordinances from UGC New Delhi.			
Date 7724 Van	der		0/~
Nodal Of	MATERIAL CO.		Pencipal S.D.College, Bargalancipal
B Voc (M	LHDT)		S.D.College, Bar Principal
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PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGI



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This form has been lessed to Mr. (M.	RUNA	lingh.	D. College, BARNAL	B
this form has been issued to Mr./Ms	unpu	7		
Regd.No. 114-2023-1069 Son of /d	aughter of Sh.	Neibhai	Singh	
residing at Barnels Who has produced evidence before me Training as per ordinances framed by Pu New Delhi.	that He/She	is entitled to r	eceive the Practical	
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Date			0/	
B Voc (MLMD		5.	D.College, Barnala	
I BUT SUM accept Kula	Section II Ligh Jung/h lame of Trainer) pital / Laborat m/her during t	of friends.	S.D. College, BARN.	ipal ALA
			Student	-
(Name of Trainer) (Name of Stud Him/her training facilities in my organizacquire:-	ent)			
Working knowledge of keeping of record Practical Experience in, Sample collection, processing and problem Precautions to be taken in clinical lab c) Hematological analysis. Biochemical analysis of various sample) Microbiological analysis of samples.	eservation. oratory	linical laborator	/-	
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I also agree that a trained technologist s	nan be assigne	a for his/her gu	idance.	
206/10/	Section IV	(Appren	tice Master) Idress of Institution	1
spread overmonths in accorda	nce with details	undergone s enumerated in	hours training section III	
I certify that Burhal Senah practical training as per ordinances fram	Section Vhas ed by Punjabi	Head of the Traccompleted in a University, Patie	d respect his/hor	
Date 31.8.24 Vander			00	
Nodal Officer			Select	
B Voc (MLMD		S.I	D.College, Barnala	

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGI



This form has been issued to Mr./Ms	SECTIONI	Kuma.	Principle
This form has been issued to Mr./Ms	Significa	0	S.D. College, BARNAU
Regd.No. 1/4-2023-1082 Son of	/daughter of Sh.	raween	Kumai gaig
residing at Barnala	State Puny	ras	U
Who has produced evidence before of Training as per ordinances framed by New Delhi.	me that He/She Punjabi Universit	is entitled to ty, Patiala, und	receive the Practical er the rules from UGC
Datol/17/24 Van	lov		6
Nodal Off	icer		Principal
B Voc (ML	MDT)		S.D.College, Barnala rincipal
	Section II		S.D. College, SARNALA
I Shaulud Tulkal accept Max (Name of Student) Laboatataluf (Name of the He training and agree to obey and respect	(Name of Trainer) ospital / Labora	tory) as my t	trainer for the above
			Student kunal
			Student
	Section III		
(Name of Trainer) (Name of St Him/her training facilities in my orga	udent)	and the same of the same	
acquire:-			
1. Working knowledge of keeping of re 2. Practical Experience in, a) Sample collection, processing and b) Precautions to be taken in clinical c) Hematological analysis. d) Biochemical analysis of various same) Microbiological analysis of samples.	preservation, laboratory mples,	clinical laborate	ory.
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I also agree that a trained technologis	t shall be assigne	ed for his/her	juidance.
			Technologist A
			entice Master) M 1W
	Section IV		Laboratory
I certify that		Is enumerated	Technologist /
	Section V	nead of the	Menak Componense
Toronto ma Strange			Laboratory
I certify that	PERSONAL PROPERTY OF THE PERSON.	Completed in University, Pa	all respect his/her stiala, under the rules
Date 31/7/2024	der		001
Nodal Off			Principal
B Voc (ML	MDT)		S.D.College, Barnalancipal

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOG



Principal S.D.College, Barnala Principal

ages in section and a section of a company of the	SECTION I	S.D.	College
This form has been issued to Mr./Ms	whatee	p singer	
This form has been issued to Mr./Ms Regd.No. 1/4-2023 - 1063 Son of /	daughter of Sh.	Balden	Lingh
residing at Drudeum	State	MUL.	V
Who has produced evidence before in Training as per ordinances framed by P New Delhi.	unjabi University	s/entitled to red , Patiala, under t	eive the Practical he rules from UGC
Date 1:7.24 Navde	N .		50
Nodal Offic B Voc (MLM	774	5.D	Principal College Barnala
	Section II		Principal
I Arthoup Singh accept Ti	Name of Trainer	hor Rook Sp	Brocker
training and agree to obey and respect	spital / Laborate	ery) as my train	er for the above
			Arandeep Singn Student
T. 0 1 - C'-ab 0 1 1	Section III		
(Name of Trainer) (Name of Stu	dent)		
acquire:-			and the first
1. Working knowledge of keeping of rec 2. Practical Experience in,	ords related to cli	nical laboratory.	
 a) Sample collection, processing and p b) Precautions to be taken in clinical la 	reservation.		
c) Hematological analysis.	STANDARD CONTROL		
 d) Biochemical analysis of various sam e) Microbiological analysis of samples. 	ples.		
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I also agree that a trained technologist	shall be assigned	for his/her guid	ance. GW
	F	Roop Computer	shorem Gy
		Jaid Manniant	red Laboratory
	Section IV	Name and add	ress of Institution
I certify that Allhales Syread over months in accord	has ance with details	undergone	. hours training
		Roop Computer	
		Helald Maciela	thadaus (Ethan
ra-utear. W	Section V		
I certify that All deap practical training as per ordinances fran from UGC New Delhi.		ompleted in all Iniversity, Patiala	respect his/her s, under the rules

Nodal Officer B Voc (MLMDT)

Date 31.7.24

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIST

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	SECTION I			3
This form has been issued to Mr./Ms Regd.No. 114-2023-1047 Son of residing at Banals.	Lovepree	t Single		
Bond No. 114-2023-1047 Son of	/daughter of Sh.	Gurdeep	singh	THE R.
Rega.No. 11	some Pu	nias /	(S.D. Coaled	20, 11/4
Training as per ordinances framed by New Delhi.	Punjabi Universit	is entitled to ty, Patiala, unde	receive the Pract or the rules from	tical UGC
Date 1.8.24 Vand	lov		- Delan	1
Nodal Off			Principal 5.D.College, Barns	alamuli
B Voc (ML	.MDT)		S.D. College, E.	ARNA
	Section II	1 0 1		
I Consposed Singh accept T	irlochan Si	ng of Roop	lab	
(Name of Student) (Name of the htraining and agree to obey and respect	Iospital / Labora	atory) as my t	rainer for the al	
training and agree to obey and respec			Lovabercal Si	nger
			Student	0
	Section III			
(Name of Trainer) (Name of S Him/her training facilities in my org acquire:-	anization so that	during his/he	training he/she	may
1. Working knowledge of keeping of r 2. Practical Experience in, a) Sample collection, processing and b) Precautions to be taken in clinical c) Hematological analysis. d) Biochemical analysis of various s	d preservation, il laboratory	clinical laborat	ory.	
e) Microbiological analysis of sampl	es.			
	1		1	sund.
I also agree that a trained technolog	jist shall be assig	ned for his/her	guidance.	170
		Jaid Mesis	uterized Laborate etaBhadaurdffa. d address of Instit	1
	Section IV	1,000,000,000		
I certify that	ordance with det	nas undergone tails enumerated	150 hours tra	aining W
		Boon Compile	terized Laborato	ry
	Section V		Commental November	
I certify thatpractical training as per ordinances	framed by Punja	as completed in abi University, I	n all respect hi Patiala, under the	s/her rules

Nodal Officer B Voc (MLMDT)

from UGC New Delhi.

S.D.College, Barnala Principal

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIS

SECTION I	
This form has been issued to Mr./Ms. Kay Single	
Regd.No. 114 - 2023-1051 Son of /daughter of SH.	The same of the same was
Regd.No. 111 2023-1031 Son of /daughter of SH:	Twan stryer
residing at Barnala State Pur Who has produced evidence before me that He/She is Training as per ordinances framed by Punjabi University, New Delhi.	entitled to receive the Practical Patiala, under the rules from UGC
Date 1. 7.24	9.0. College, BARNA
Nodal Officer	Principal
B Voc (MLMDT)	S.D.College, Barnala
(Name of Student) (Name of Student) (Name of Trainer) (Name of the Hospital / Laborato training and agree to obey and respect him/her during the	rv) as my trainer for the above
Section III	Studgit
(Name of Trainer) (Name of Student) Him/her training facilities in my organization so that du acquire:-	
1. Working knowledge of keeping of records related to clir 2. Practical Experience in, a) Sample collection, processing and preservation. b) Precautions to be taken in clinical laboratory c) Hematological analysis. d) Biochemical analysis of various samples. e) Microbiological analysis of samples.	nical laboratory.
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I also agree that a trained technologist shall be assigned Section IV	(Apprentice Mister) Name and address of Institution
I certify that Ray months in accordance with details	andergone 180 hours training
A O Section V	Head of the Landship Institution
I certify that	ompleted in all respect his/her niversity, Patiala, under the rules
Date 31.7.24 Namedon	00
Nodal Officer	Mincipal
B Voc (MLMDT)	S.D.College, Barnala

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGI

	SECTION I		Principal
This form has been issued to Mr./Ms	Hardeep	Single	e BARNAL
Read No. 114-2023-1044son of	daughter of Sh. Bal	jees Dsing 6	
Oct - Fo	P int	1	
This form has been issued to Mr./MsRegd.No. 114-2023-1049 Son of residing atBCUN alg. Who has produced evidence before in Training as per ordinances framed by New Delhi.	State Fundamental Punjabi University, Pati	itled to receive the ala, under the rule	ne Practical s from UGC
Date. 118.27	7/4	a n Callego	PARMIALA
Nodal Offi	cer	S.D. College	
B Voc (MLI	MDT)	S.D.Colleg	e, Barnala
(Name of Student) (Name of the Hotraining and agree to obey and respect	(Name of Trainer) ospital / Laboratory)	as my trainer for	the above
		Sti	jasteep Sign
1	Section III		120/2003
(Name of Trainer) (Name of St	udent)	ee and I agree to g	ive
Him/her training facilities in my orga acquire:-	nization so that during	his/her training	ne/sne may
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I also agree that a trained technologic		(Apprentice Malame and address of	
I certify that Hanny Sinv spread over months in acco		lergone 180 ho imerated reinglon Gun Technician Lab Technician ad of the Training I	ours training
11 - 01	Section V		1
I certify that	ramed by Punjabi Univ	oleted in all resp versity, Patiala, und	dect his/her der the rules
Date 31.8.29 Van	low	G	the 1
Nodal Of	PATRICULAR CONTRACTOR	THE PARTY OF THE P	ncipal
B Voc (M	LMDT)	S.D.Colle	ge, Barnplancipal

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIST

SECTION	1
This form has been issued to Mr./Ms. Shub	ham Single
This form has been issued to Mr./Ms. Shub Regd.No. 114-2023-1090Son of /daughter of	of sh. Sutantal tunal
residing at Barnala State	P 11-1
Who has produced evidence before me that He Training as per ordinances framed by Punjabi Univ New Delhi.	ICha la later to
Date 1.8.24 Naudu	
Nodal Officer	Office V
B Voc (MLMDT)	Principal Principal
1	STOTE OF SHIP METER CHALL
(Name of Student) (Name of the Hospital / La training and agree to obey and respect him/her du	discussion of the second secon
	Student
Section III	I,
(Name of Training facilities in my organization so t	Student Las a trainee and I agree to give that during his/her training he/she may
1. Working knowledge of keeping of records related 2. Practical Experience in, a) Sample collection, processing and preservation b) Precautions to be taken in clinical laboratory c) Hematological analysis. d) Biochemical analysis of various samples. e) Microbiological analysis of samples.	
I also agree that a trained technologist shall be ass	signed for his/her guidance.
Stubbam Sinante	(Apprent aby Stern) Name and address of Institution (Apprent aby Stern) Name and Apprent (Apprent aby St
residui cialling as per ordinances framed by Dun	Head of the Tramilio Institution (1)
	The same the rules
Date 31.8.24	DI
Nodal Officer	Pelocioni

B Voc (MLMDT)

S.D.College, Barnatincipal

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOG



S.D.College, Barrola:ipal

Regd.No. 114-2023-1045 Son of /daughter of Sh. Bally SD.Cy De BAR. 118 Regd.No. 114-2023-1045 Son of /daughter of Sh. Bally SD.Cy De BAR. 118 residing at Bounds State Purjab Who has produced evidence before me that He/She/is entitled to receive the Practical Training as per ordinances framed by Punjabi University, Patiala, under the rules from USC. New Delhi. Date		SECTION	IT.	8
residing at Bounds State	This form has been issued t			Principa
Who has produced evidence before me that He/She/is entitled to receive the Practical Training as per ordinances framed by Punjabi University, Patiala, under the rules from UGC. New Delhi. Date				D. Coll Co. BAR
Training as per ordinances framed by Punjabi University, Patiala, under the rules from UGC New Delhi. Date. 1. 7.24 Nodal Officer B Voc (MLMDT) S.D. Collogo, BARNALA S.D. Co	residing at Boungle	State	Puniah.	
Nodal Officer B Voc (MLMDT) Section (Rame of Student) (Name of Student) (Name of Student) (Name of the Hospital / Laboratory) as my trainer for the above training and agree to obey and respect him/her during the entire period of my training. (Name of Trainer) (Name of Student) Section III Section III Lucy Edday accept (Name of Student) Accept (Name of Student) (Name of Irainer) (Name of Student) (Name of Irainer) (Name of Student) (Name of Irainer) (Name of Student) (Name of Student) (Name of Irainer) (Name of Student) (Name of Student) (Name of Irainer) (Name of Student) (Name of Irainer) (Name of Student) (Name of Irainer) (Name and address of Institution (Apprentice Isaster) (Name and address of Institution (Apprenti	Training as per ordinances New Delhi	ce hefore me that U-	104-1	receive the Practical
I. (Name of Student) (Name of Trainer) (Name of Trainer) (Name of Student) (Name of Student) (Name of Trainer) (Name of Student) (Name of Trainer) (Name of Student) (Name of Trainer) (Name of Trainer) (Name of Student) (Name of Trainer) (Name of Trainer) (Name of Student) (Name of Trainer) (Name of T		Nandon		
I. Warne of Student) I. When and agree to obey and respect him/her during the entire period of my training. Section III I. Warne of Student) I. Warne of Student) I. Warne of Student) I. Warne of Student obey and respect him/her during the entire period of my training. Section III I. Warne of Trainer) I. Warne of Student) I. Warne of Student) I. Warne of Trainer) I. Warne of Student) I. Working knowledge of keeping of records related to clinical laboratory. 2. Practical Experience in, a) Sample collection, processing and preservation. b) Precautions to be taken in clinical laboratory C) Hematological analysis. d) Biochemical analysis of various samples. e) Microbiological analysis of samples. I also agree that a trained technologist shall be assigned for his/her guidance. (Apprentice Master) Name and address of first turion Section IV I certify that. Section IV I certify that. Section III Cause Survey And		THE PROPERTY OF THE PARTY OF TH	S.D. (Principal
(Name of the Hospital / Laboratory) as my trainer for the above training and agree to obey and respect him/her during the entire period of my training. Section III Student Student Student Student I Why and Jay as a trainee and I agree to give (Name of Student) Him/her training facilities in my organization so that during his/her training he/she may acquire:- 1. Working knowledge of keeping of records related to clinical laboratory. 2. Practical Experience in, a) Sample collection, processing and preservation. b) Precautions to be taken in clinical laboratory c) Hematological analysis of various samples. e) Microbiological analysis of various samples. e) Microbiological analysis of samples. I also agree that a trained technologist shall be assigned for his/her guidance. (Apprentice Manuer) Name and address of institution Section IV I certify that Summ has undergone Some hours training spread over Manuer and Summer	- 0	B Voc (MLMDT)		rancipal.
(Name of the Hospital / Laboratory) as my trainer for the above training and agree to obey and respect him/her during the entire period of my training. Section III Student Student Student Student I Why and Jay as a trainee and I agree to give (Name of Student) Him/her training facilities in my organization so that during his/her training he/she may acquire:- 1. Working knowledge of keeping of records related to clinical laboratory. 2. Practical Experience in, a) Sample collection, processing and preservation. b) Precautions to be taken in clinical laboratory c) Hematological analysis of various samples. e) Microbiological analysis of various samples. e) Microbiological analysis of samples. I also agree that a trained technologist shall be assigned for his/her guidance. (Apprentice Manuer) Name and address of institution Section IV I certify that Summ has undergone Some hours training spread over Manuer and Summer	, Pukhman Sins	Section I	P. Carlo	ALOYE
Section III Section III Section III Student Name of Trainer) (Name of Student) (Name of Trainer) (Name of Student) Him/her training facilities in my organization so that during his/her training he/she may acquire: 1. Working knowledge of keeping of records related to clinical laboratory. 2. Practical Experience in, a) Sample collection, processing and preservation. b) Precautions to be taken in clinical laboratory c) Hematological analysis. d) Biochemical analysis of various samples. e) Microbiological analysis of samples. I also agree that a trained technologist shall be assigned for his/her guidance. (Apprentice Master) Name and address of first human has undergone on hours training spread over	(Name of Student)	(Mame of Tr	of Cyeu No	10001/COMPUTENCE
Section III I Why section accept Sudent (Name of Student) (Name of Trainer) (Name of Student) Him/her training facilities in my organization so that during his/her training he/she may acquire: 1. Working knowledge of keeping of records related to clinical laboratory. 2. Practical Experience in, a) Sample collection, processing and preservation. b) Precautions to be taken in clinical laboratory c) Hematological analysis. d) Biochemical analysis of various samples. e) Microbiological analysis of samples. I also agree that a trained technologist shall be assigned for his/her guidance. (Apprentice Master) Name and address of Institution Section IV I certify that Section IV I certify that Many Many has undergone hours training spread over months in accordance with details enumerated in section III	training and agree to obey a	of the Hospital / Li and respect him/her du	aboratory) as my tr iring the entire period	d of my training.
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Him/her training facilities in my organization so that during his/her training he/she may acquire:- 1. Working knowledge of keeping of records related to clinical laboratory. 2. Practical Experience in, a) Sample collection, processing and preservation. b) Precautions to be taken in clinical laboratory c) Hematological analysis. d) Biochemical analysis of various samples. e) Microbiological analysis of samples. I also agree that a trained technologist shall be assigned for his/her guidance. (Apprentice Master) Name and address of institution Section IV I certify that Succession in the sample of the	(Name of Trainer)	Sukhman Kian	Aas a trainee and I a	gree to give
a) Sample collection, processing and preservation. b) Precautions to be taken in clinical laboratory c) Hematological analysis. d) Biochemical analysis of various samples. e) Microbiological analysis of samples. I also agree that a trained technologist shall be assigned for his/her guidance. (Apprentice Master) Name and address of institution Section IV I certify that Survey has undergone hours training spread over months in accordance with details enumerated in section III	Him/her training facilities is acquire:-	n my organization so	that during his/her I	training he/she may
a) Sample collection, processing and preservation. b) Precautions to be taken in clinical laboratory c) Hematological analysis. d) Biochemical analysis of various samples. e) Microbiological analysis of samples. I also agree that a trained technologist shall be assigned for his/her guidance. (Apprentice Master) Name and address of institution Section IV I certify that Survey has undergone hours training spread over months in accordance with details enumerated in section III	1. Working knowledge of ker	eping of records relate	d to clinical laborator	ν.
I also agree that a trained technologist shall be assigned for his/her guidance. (Apprentice Master) Name and address of institution Section IV I certify that. I certify that. Section IV Apprentice Master) Name and address of institution Section IV Apprentice Master) Name and address of institution Apprentice Master) Apprentice Master) Name and address of institution Apprentice Master) Apprentice Master) Name and address of institution Apprentice Master) Name and address of institution Apprentice Master) Name and address of institution Apprentice Master) Apprentice Master Name and address of institution Apprentice Master Name and Apprentice	a) Sample collection, proce	ssing and preservation		**
I also agree that a trained technologist shall be assigned for his/her guidance. (Apprentice Master) Name and address of first fution I certify that	b) Precautions to be taken	in clinical laboratory		
I also agree that a trained technologist shall be assigned for his/her guidance. (Apprentice Master) III Name and address of institution I certify that	d) Biochemical analysis of v	various samples.		
I certify that		or sumpress.		
I certify that Sykuman imm has undergone hours training spread over months in accordance with details enumerated in section III	I also agree that a trained to	echnologist shall be as	signed for his/her gu	idance.
I certify that Sykhman imm has undergone hours training spread over months in accordance with details enumerated in section III				Auricet Sint 1
I certify that Sykuman Symm has undergone 80 hours training spread overmonths in accordance with details enumerated in section III	0		(Appren	tice Master)
Guneet Sure		Section IV	Name and ac	Jul 2
Guneet Sure	I certify that Sykus	nan Sinny	has undergone 18	O hours training
Gunser	, and the second	is in accordance with d	etans enumerated in	
				The state of the s
Section V	().	Section V	The The The	DALL JUNE
I certify that	I certify thatXYK	nances framed by Pur	nas completed in a rjabi University, Patia	ill respect his/her
	Date. 31. 7. 24	No don	A	00

Nordan Nodal Officer

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIST



	CECTION I	Par
24.6	SECTION I	S.D. College, Barrials
This form has been issue	d to Mr./Ms. Nisha Gayal	
Regd.No. SD (B)200-	-672 son of /daughter of Sh. Sush	el goyal
residing at Rovena	la state Runiab	0 1
Who has produced evid-	ence before me that He/She is entitled	to receive the Practical
Training as per ordinance New Delhi.	es framed by Punjabi University, Patiala,	under the rules from UGC
	Vandor	00
Date. 1.7.2 4	B Voc (MLMDT)	S.D.College, Bancileal
	B VOC (MEMOT)	S.D. College, Barnala
William Co.	Section II	The Control of the Co
1 Nisha Goyal	accept farance t Sight Deolor De	of computerised.
(Name of Student)	me of the Hospital / Laboratory) as n	ay trainer for the above
training and agree to obe	ey and respect him/her during the entire	period of my training.
		vo c.l
		Student
10.00	Section III	
Canamiet sligh	pt Misha Goyal as a traince as	nd I agree to give
(Name of Trainer)	(Name of Student)	
Him/her training facilitie acquire:-	es in my organization so that during his	her training he/she may
CONTRACTOR CONTRACTOR	and the second second	
Working knowledge of Practical Experience in	f keeping of records related to clinical labor	pratory.
a) Sample collection, pr	rocessing and preservation.	
	ken in clinical laboratory	
 d) Hematological analysis 		
e) Microbiological analy	ysis of samples.	
I also agree that a train	ed technologist shall be assigned for his/	her guidance.
		man Khu
		Apprended Computerised Laboratory
	Section IV	and agg Acref Shop No. 40.Barr
1000		ton
I certify that	has undergo	ne hours training
spread over	nonths in accordance with details enumer	ated in section 14
	10.00	the Raining Philipping Laboratory
	Section V Head of	22 Acre, Shop No. 40 Bernala
A A		
I certify that/\(\Lambda\)	ordinances framed by Punjabi Universit	d in all respect his/her
from UGC New Delhi.	ordinances frames by rungable officerate	Mu
Date 31-7-44	Much	Pfincipal
Date: Milandi Milani	HOD	S.D. College, BARNALA
	B Voc (MLMDT)	S.D.College, Barnala

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIS

Date. 0.6.19

			(3)
			1
	SECTION I	-1	-0.
This form has been issued to Mr./Ms	triyanka	Shaima	
This form has been issued to Mr./Ms Regd.No. 114-2-023-1228 Son of	/daughter of Sh	Jasuis ku	S.D. College
residing at Sheepen			
Who has produced evidence before Training as per ordinances framed by New Delhi.	me that He/She is	entitled to receive th	s from UGC
Date 07/06/24 Nowl	/	1205	Princip
100	~		lege, BARNAL
Nodal Off B Voc (ML	PETER CO.	Princ S.D. College	
	200000000000000000000000000000000000000	S.D.College	, barnala
80 . 1. 00	Section II		f de
I historical student) accept the	(Name of Trainer)	or Bone Superspecial	laty
(Name of Student) (Name of the H training and agree to obey and respect	ospital / Laborator	ry) as my trainer for	the above
training and agree to obey and respect	him/her during the	entire period of my tra	ining.
		Mex	~XX
	Section III	Stu	dent
12 2 h . 4 = 0 Pa . 4	Section III		
I Horpiset Sing . accept Knycon Kg	houng as a tr	ainee and I agree to gi	ve
(Name of Trainer) (Name of St Him/her training facilities in my orga acquire:-	nization so that du	ring his/her training h	e/she may
1 Working knowledge of keeping of	enade autoro de la compansión de la comp		
 Working knowledge of keeping of re Practical Experience in, 	cords related to clin	ical laboratory.	
a) Sample collection, processing and	preservation.		
 b) Precautions to be taken in clinical c) Hematological analysis. 	laboratory		
d) Biochemical analysis of various sar	mples.		
e) Microbiological analysis of samples			
	1		
I also agree that a trained technologis	t shall be assigned t	for his/her guidance en	aciality Hospital
		BWir anhorate	ya Road,
		(Apprentice Mast	eraini (Ph.)
	1122 - 122 -	Name and address of	Institution
0 0.	Section IV		211111111111111111111111111111111111111
I certify that Virginity Sharms	has u	ndergone 180 hou	e training
spread over. Andmonths in accor	dance with details e	numerated in section I	He-spital
		dood of the Training To-	414.47
	Section V	fead of the Training Ins	Citation
I certify that Priyanka St	aima.	AND WIND CO. CO.	
practical training as per ordinances from UGC New Delhi.		mpleted in all respec- niversity, Patiala, under	ct his/her r the rules
Date 0.6/07/24	m /		DO
Nodal Offi	car		Principal

	The state of the s	
(Name of Trainer)	(Name of Student)	as a trainee and I agree to give
Him/her training faciliti acquire:-	es in my organization so the	at during his/her training he/she may
Working knowledge of 2. Practical Experience in a contract of the contrac	keeping of records related t	to clinical laboratory.
a) Sample collection, pr	rocessing and preservation. ken in clinical laboratory	
c) Hematological analy	sis.	
 d) Biochemical analysis e) Microbiological analysis 	of various samples. sis of samples.	
	1	
I also agree that a train	ed technologist shall be assig	gned for his/her quidance speciality Hospita
		Handiaya Road, (Apprentice Masterato) (Pb.)
	S	Name and address of Institution
I certify that high	Section IV	
spread over	onths in accordance with de	has undergone 180 hours training tails enumerated in section III pital
		tteb
	Section V	Head of the Training Institution
I certify that	ordinances framed by Punja	as completed in all respect his/her abi University, Patiala, under the rules
Date 9.6/07/24	Vouder	D.C.
	Nodal Officer	Principal
	B Voc (MLMDT)	SID. GOILGEPERMENT

Date 31-7-24

PRACTICAL T	RAINING CONTRACT FORM FOR	MEDICAL LAB TECHNOLOGIS
This form has been iss	SECTION I HUGO NP	sect Bawa College, BARNALA Baghel Bass Ajab e is entitled to receive the Practical
114-202	2 1054	Parlal Age
Regd.No. 117	5-103 7 Son of /daughter of Si	Dagner Dass
who has produced e Training as per ordina New Delhi.	vidence before me that He/Sh inces framed by Punjabi Univers	s entitled to receive the Practical ity, Patiala, under the rules from UGC
1730	Naudor	-0
Date1724	Nodal Officer	n. Olar
	B Voc (MLMDT)	Principal S.D.College, Barnala
		Princloal
	Section II	S.D. College, BARNALA
LABORATERY (Name of the Hospital / Laborobey and respect him/her during) atory) as my trainer for the above the entire period of my training.
		Student
	Section III	Student
Count ale		
(Name of Trainer)	(Name of Student) (Name of Student) (Name of Student)	a trainee and I agree to give t during his/her training he/she may
Practical Experience Sample collection, Precautions to be Hematological and Biochemical analy	processing and preservation. taken in clinical laboratory	clinical laboratory.
	1	and the blacker wilders and Guld Guld
I also agree that a tra	nined technologist shall be assig	hed for his/her guidance. (Surlal Singh)
	Section IV	(Apprentice Master), M.L.T Name and address of Institution
I certify thatHUSA	MPREET AAWA	Gurial Singh Head of the Training Ihalitytichnician
		Gurlal Single
	- Andrewson and	Head of the Training Ibabty Bennician
	Section V	D.M.L.T
	JSANPRAGE LAWA has been ordinances framed by Punja	completed in all respect his/her bi University, Patiala, under the sules
Date 31-1-2-9	Vander	S.D. College, BARNALA

Nodal Officer B Voc (MLMDT)

Principal S.D.College, Barnala

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIST

			13
	SECTION I	- Kau	00
This form has been issued to Mr./Ms	Mausaprees	O di	Principal
Regd.No. 114-2023-1048 Son of	/daughter of Sh	Balvin Sing Colles	BARNALA
who has produced evidence before Training as per ordinances framed by New Delhi.	me that He/She is	entitled to receive the P	ractical om UGC
Date 1: 6: 24. Nodal Off B Voc (ML		Principal S.D. College, Br 8.D. College, E.	Principal ARNALA
	Section II	347	
I. thus Prut Kaus accept P. (Name of Student) 1 Older Of the H training and agree to obey and respec	ospital / Laborato	ry) as my trainer for the	above
	Section III	Studen	t hearte
(Name of Trainer) (Name of St Him/her training facilities in my orga acquire:-	Aut Koutas a t		he may
Working knowledge of keeping of re Practical Experience in, Sample collection, processing and Precautions to be taken in clinical c) Hematological analysis. Biochemical analysis of various sa	preservation. laboratory amples.		
I also agree that a trained technologi	st shall be assigned	for his/her guidance. Par Vijay Computerised	chant
	Section IV	(Apprentice Master) Name and address of Ins	
3. I	The second second		
I certify that	has rdance with details	enumerated in section III For Vijay Computerised Laborated	ant-
	W. 100 100	Head of the Training Instit	ution
I certify that Khushpaud of practical training as per ordinances of from UGC New Delhi.		completed in all respect University, Patiala, under th	
Date 1.7.24 Varile	V		7
Nodal Of	ficer	Principa	ii/

B Voc (MLMDT)

Principal S.D.College, Barnata

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGI



Principal

			Procedure
	SECTION I	01 -0001	College BARRELLA
This form has been issued to Mr./Ms.	prince	single	
This form has been issued to Mr./Ms. Regd.No. 114-13-252 Son of residing at Barnala Who has produced evidence before	/daughter of Sh.	Prem Ku	imac Singla
residing at Barnala	State Pu	njas	
Who has produced evidence before Training as per ordinances framed by New Delhi.	me that He/She Punjabi Universi	is entitled to re ty, Patiala, under	the rules from UGC
Date 1-June 24 Vand	pr/		
Nodal Of	ficer		Principal 6
B Voc (M	LMDT)	S	D.College, Bargala notice
0	Section II		LD. College, BARNALA
Vaina Sila MiD	arinder Steel	be - 1144	- bosofoury.
(Name of Student)	(Name of Trainer)	12:20Tbahaingan	ndendritika /
(Name of the I	Hospital / Labora	atory) as my tr	ainer for the above
training and agree to obey and respe-	ct him/her during	the entire period	of my training.
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			estudent
0	Section III		
PRayinder Closes accept Perine	e Sinkas	a trainee and I a	gree to give
(Name of Trainer) (Name of 5	Student)		
Him/her training facilities in my org acquire:-	anization so that	during his/her	training he/she may
1. Working knowledge of keeping of	records related to	clinical laborato	ry.
2. Practical Experience in,			
a) Sample collection, processing an	d preservation.		
 b) Precautions to be taken in clinical c) Hematological analysis. 	II laboratory		
d) Biochemical analysis of various s	amples.		
e) Microbiological analysis of samp	les.		
			- 0/
I also agree that a trained technolog	jist shall be assig	ned for his/her g	Pide City Laboratory
		/),7
		(Appre	entice Master)
		Name and	address of Institution
0	Section IV		
I certify that Junio	ingla.	as undergone	0 hours training
spread over4 242 months in acc	ordance with det	ails enumerated	n section III
			City Labora
		Head of the	raining Institution
	Section V	11000 01 710	L blob.
I certify that Prince Si.	rale.		No assessed to be of the second
I certify that practical training as per ordinances	framed by Punja	s completed in abi University, Pa	all respect his/her tiala, under the rules
from UGC New Delhi.			-
Date July 27 No	Ser .		0//
Nodal (Officer		Principal
B Voc (S.D.College, Barnala

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOL

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	Practical rom (GC
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Maste ss of I	Bus Stand
hours	Clinical Lar Bus Stand
respec	t his/her the rules
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SECTION 1	26
This form has been issued to Mr./Ms. SECTION I Gagande Regd.No. 5/11/- 20/6-1760Son of /daughter of Sh residing at Mansa State full	ean Sharma
This form has been issued to Mr./Ms.	S.D. Conege, E
Regd.No. 5/11 - 20/6-1760son of /daughter of Sh	. Vagannath sharma
residing at MARIA State Pu	inias
Who has produced evidence before me that He/She Training as per ordinances framed by Punjabi Univers New Delhi.	sity, Patiala, under the rules from UGC
Date / Tunk 24 Namer	S.D. College, BARNA
Nodal Officer	S.D. Principal
B Voc (MLMDT)	S.D.College, Barnala
Section II	
(Name of Student) (Name of Trainer training and agree to obey and respect him/her during	of Kannal Chricel La r) ratory) as my trainer for the above g the entire period of my training.
	-
	Student 4 a Cond
Section III	Student 4 asarde
I. Man't Sigaccept 67 agandus Share (Name of Trainer) (Name of Student) Him/her training facilities in my organization so that acquire:-	s a trainee and I agree to give
Working knowledge of keeping of records related to Practical Experience in, Sample collection, processing and preservation. Precautions to be taken in clinical laboratory	o clinical laboratory.
c) Hematological analysis.	
d) Biochemical analysis of various samples.	
e) Microbiological analysis of samples.	mannit Sho
	manyit sud
I also agree that a trained technologist shall be assig	ned for his/her guldabied Offfical I Near Bus Stand
	(Apprentice Master)
Section IV	Name and address of Institution
	1.00
I certify that Gagardeep Sharma h	Namai Clinical
	Head of the Training Institution
Section V	DOTAIN COALED IN
I certify that gardey Sharme ha practical training as per ordinances framed by Punja from UGC New Delhi.	s completed in all respect his/her abi University, Patiala, under the rules
- 1 Tulse 24 1 lon	00/
Date July 24 Nodel Officer	pontion /
B Voc (MLMDT)	S.D.College, Barnala

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIST



		SECTION	1		JASDEEP
This form has be	een issued to Mr.,	Ms. Jasde	ep kaur	S.D.	Co leg 08/03/20
Regd.No. [14-]	1023-1079 s	on of /daughter o	fsh. Bala	r'ader Sch	ga
residing at	Baenala	State	Punjab		,
Who has produ	iced evidence be	fore me that He ed by Punjabi Univ	/She is entitle	ed to receive t	the Practical es from UGC
Date / Jun	24	Sanda			0
	Nod	al Officer			nulpal
		c (MLMDT)			ge, Barnala ipa ge, BARNAL
I. Jasdeep (Name of Stu	dent) dent) (Name of the ree to obey and re	Section I Kul Lhack (Name of Tri the Hospital / Lespect him/her du	AL Chyla ainer) aboratory) as uring the entire	Public my trainer for e period of my t	Conpress
					asdeep Kau
				SI	tudent
(Name of Trail Him/her trainin acquire:- 1. Working kno 2. Practical Exp a) Sample col b) Precaution c) Hematolog d) Biochemica	iner) (Name or facilities in my wledge of keeping perience in, lection, processin s to be taken in cl ical analysis.	ous samples.	that during h	is/her training	
e) Microbiolog	gical analysis of s	amples.			
I also agree th	at a trained techr	nologist shall be a		s/her quichized	Public Comp
		Section 1	rv	-	
I certify thatspread over	Daemonths in	Aut accordance with	has undergo details enume	Kul Barrel	ours training n III on Guest uteriood Lab.
		Section	V	Jain/Mark	0.238750
I certify that practical training from UGC New	ng as per ordina	deep kan	has complet unjabi Univers	Ph. 8167 ted in all res sity, Patiala, un	pect his/her

Nodal Officer B Voc (MLMDT) S.D.College, Barnala

Principal

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIS

College, MARMAL
e the Practical rules from UGC
Principal Hindi
for the above y training.
Student Hardeef Single
ng he/she may
ed Laboratory
Master)
hours training
Prop.*
under the rules
Principal

This form has been issued to Mr./Ms. Hardeep Singh

Regd.No. 114-2023-1042 Son of /daughter of Sh. Ranbis Regd.No. 114-2023- 1042 Son of /daughter of Sh. __ residing at Banala State Who has produced evidence before me that He/She is entitled to receive Training as per ordinances framed by Punjabi University, Patiala, under the New Delhi. Date 1 June 24 S.D.Col B Voc (MLMDT) Section II (Name of Student) (Name of Trainer) as my trainer training and agree to obey and respect him/her during the entire period of m Wijay Kurnat Singla Harder S as a trainee and I agree to (Name of Trainer) (Name of Student) Him/her training facilities in my organization so that during his/her training acquire:-1. Working knowledge of keeping of records related to clinical laboratory. 2. Practical Experience in, a) Sample collection, processing and preservation. b) Precautions to be taken in clinical laboratory c) Hematological analysis. d) Biochemical analysis of various samples. e) Microbiological analysis of samples. I also agree that a trained technologist shall be assigned for his/her quit For Vijay Computeris (Apprentice Name and addre Section IV I certify that Haldep Singly has undergone spread over months in accordance with details enumerated to sec For Vijay Computers Head of the Trainer Section V I certify that Hadup Singh has completed in all repractical training as per ordinances framed by Punjabi University, Patiala, from UGC New Delhi. **Nodal Officer** B Voc (MLMDT) S.D.College, Barnala

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIS

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	SECTION I	est kan
This form has been issue	ed to Mr./Ms. Plantek pie	S.D. College, SAIN
Regd.No. 114-2023-	1066Son of /daughter of Sh	Guyit Sings
residing at Bac	nale state Punp	ias v
who has produced evic	dence perore me that ne/sne/is	entitled to receive the Practical Patiala, under the rules from UGC
Date / June 24	Vandor	00
Datemannan	Nodal Officer	Principal
	B Voc (MLMDT)	S.D. College, Barnala LA
	Section II	The same of the sa
1 Mahek Preet Kan	a accept Ma Kammi (MLTI)	or Civil Hospital
Samue of Student) (No	(Name of Trainer) ame of the Hospital / Laborator ey and respect him/her during the	ry) as my trainer for the above
training and agree to ou	ey and respect many ner during an	
		Hahelabaeetker
	Section III	
I Ms. Kammi acco	ept Make Klaur as a ti	rainee and I agree to give
(Name of Trainer)	(Name of Student)	ring his/her training he/she may
1. Working knowledge o	of keeping of records related to clir	nical laboratory.
2. Practical Experience i	n, processing and preservation.	
	ken in clinical laboratory	
c) Hematological analysis		
 d) Biochemical analysis e) Microbiological anal 		
I also agree that a train	ned technologist shall be assigned	for his/her guidance.
**************************************	-	Kanul
		(Apprentice Master)
		Name and address of Institution
12.1	Section IV	144
I certify that	nonths in accordance with details	
		Head of the Traingegibraledical Officer
		Head of the Traingegibre Medical Officer
(4.5)	Section V	¥c Civil Hospital Barnala
I certify that	r ordinances framed by Punjabi U	ompleted in all respect his/her Iniversity, Patiala, under the rules
from UGC New Delhi.		00
Date July 27	Valor	Qt-
	Nodal Officer	Reincipal

Nodal Officer B Voc (MLMDT)

S.D.College, Barnala

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIS

				4
	SECTION I	Charac		Billion
This form has been issued to Mr./Ms	Sheha	Sharme	S.D. Comora I	RARNA
This form has been issued to Mr./Ms Regd.No. 114-2023-1056 Son of	/daughter of Sh.	Shir Run	nas Shaim	a
residing at Barnale Who has produced evidence before Training as per ordinances framed by New Delhi.	StatePuny me that He/She	is entitled to r	eceive the Pract	ical
Date / Time 24 Nordal Of B Voc (MI	ficer	S	Principal D.College, Barnal	raipal
	Section II	4		- Transfer
I. Sneha Shanna accept Ha	(Name of Trainer))		ove
training and agree to obey and respec			of my training.	
			sneha Il	COCK
	Section III		Student	5
(Name of Trainer) (Name of S Him/her training facilities in my orgacquire:-	tudent)	a trainee and I a	William Country Transcript	nay
Working knowledge of keeping of r Practical Experience in, Sample collection, processing and Precautions to be taken in clinical Hematological analysis. Biochemical analysis of various sa Microbiological analysis of sample	preservation. laboratory amples.	clinical laborator	у.	
		THE PROPERTY OF	120/1200	
I also agree that a trained technologi	st shall be assign	ed for his/her gu		
			Kamui ntice Master)	
	Section IV	Name and a	ddress of Institut	tion
I certify that Sucha Show spread over One months in acco	wah	as undergone	80 hours train	ning
			raining Medical	officer
	Section V	nead of the T	Civil Hospital	Barnala
I certify that	sharme has	completed in	all respect his/	her
Date / July 24 Voud	~		00	
V Nodal Of	ficer		Principal	
B Voc (M	LMDT)	5	D.College, Barna	ila

Principal

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIST

This form has been issued to the Regd.No. 114-2023-1089	section i Mr./Ms. Adash	Panday	S.D. Co. egs, BARNACA
Regd.No. 114-2023-1089	Son of /daughter of Sh.	Anil Pa	anday
residing at Barnal	2 State P	unjas	0
Who has produced evidence Training as per ordinances fra New Delhi.	before me that He/She		
Date 1 June 24	Vandar		00
1107	lodal Officer		Principal
В	Voc (MLMDT)		S.D.College, Barnelancipal S.D. College, BARNALA
11 . 0 1	Section II		
I Holasuh landay acc	ept Ms. Kammi (MIT.	Dor Civil	Haspital
(Name of Student) (Name of training and agree to obey and	of the Hospital / Laborat	tory) as my t	rainer for the above
			Adarsh Panelay
	Section III		Student
- Na Vanni	1 1 D 1		er and de species and de
(Name of Trainer) (Na	me of Student)	trainee and I	agree to give
Him/her training facilities in acquire:-		during his/her	training he/she may
Working knowledge of keep Practical Experience in,	oing of records related to o	linical laborate	ory.
a) Sample collection, process			
b) Precautions to be taken in	clinical laboratory		
d) Hematological analysis. d) Biochemical analysis of value.	Control of the Contro		
e) Microbiological analysis o	f samples.		
I also agree that a trained te	chnologist shall be assigne		Control of Control
			entice Master)
	Section IV	Name and	address of Institution
A 1 P			6
I certify that	lawelay has in accordance with detail	s undergone . Is enumerated	in section III
			Town Million
	Section V	Head of the	reginiog Medication Vc Civil Hospital Barnala
A -0			C CIVII NOSPILA
I certify that Aday practical training as per ordin from UGC New Delhi,	nances framed by Punjabi	completed in University, Pa	all respect his/her itiala, under the rules
Day 1 July 24	16 des		00
Date 1 July 24	Nodal Officer		Principal
	Voc (MLMDT)		S.D.College, Barnala
			en a Principal

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGI

This form has been issued to Mr./Ms. SECTION	that Garg S.D. College HARNA
Regd.No. 114-2023-1058 Son of /daught	Silve dev Grace
residing at Barnala. State Who has produced evidence before me that Training as per ordinances framed by Punjabi New Delhi.	He/She is entitled to receive the Practical
Date 1-Julie 24 Vandor	
Nodal Officer B Voc (MLMDT)	S.D.College, Barolda Principal
I. Nischal Clarg. accept Ms. Kaming (Name of Student) (Name of the Hospital of training and agree to obey and respect him/he	S.D. College, BARNALA Trainer) Laboratory) as my trainer for the above
	Mischael Gare
Section	n III
(Name of Trainer) (Name of Student) Him/her training facilities in my organization acquire:-	so that during his/her training he/she may
1. Working knowledge of keeping of records re 2. Practical Experience in, a) Sample collection, processing and preserva b) Precautions to be taken in clinical laborato c) Hematological analysis, d) Biochemical analysis of various samples. e) Microbiological analysis of samples.	ation.
I also agree that a trained technologist shall b	
	(Apprentice Master) Name and address of Institution
Section	
I certify that	has undergone 180 hours training with details enumerated in section III
	Town and
Secti	Head of the Traiging Treatititiesh Officer
I certify that Nischel Garge practical training as per ordinances framed from UGC New Delhi.	
Date 1 July 2024 Yand	60
Nodal Officer	Principal
B Voc (MLMDT)	S.D.College, Barnala

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIST

			40	100
This form has been issued to Mr./Ms.	SECTION I	L	8.1	D. Co.
This form has been issued to Mr./Ms.	Jusm	een N	aur	
Regd.No. 114-2023-1083 Son of	/daughter of S	sh. Cham	ikane s	irgh
residing at/ Who has produced evidence before Training as per ordinances framed by New Delhi.	State	runjas		0
Date True - 24 Nodal Off B Voc (ML	ficer .MDT)		S.D.Colle	rincipal Principa ege, Barnala MALL
I	(Name of Traine	eratorul ac m	ny trainer for	or the above training.
	Section III		U	asmeen Kau
(Name of Trainer) (Name of St Him/her training facilities in my orga acquire:-	udent)	s a trainee an	d I agree to her training	give he/she may
Working knowledge of keeping of re Practical Experience in, Sample collection, processing and Precautions to be taken in clinical Hematological analysis. Biochemical analysis of various same Microbiological analysis of samples.	preservation. laboratory	o clinical labo	ratory.	
	1			
I also agree that a trained technologis	t shall be assig	(A)	pprentice Ma	amu'
	Section IV	Name a	nd address	of Institution
I certify that LAMELU Kar spread over DIAL months in accor		alls enumerat	ed in section	III
	Section V	Head of th	ne Tgaining I	reditation ficer
I certify that	aur bo		#C CIVII F	iospitai Darria
Date 1- July -24 Norder Nodal Office	cer		0	ncipet
B Voc (MLN				ge, Barnala

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIST

	SECTION I		10.63
This form has been issued to Mr./	Ms. Simian	Kumari sp.	oilege, BARNALA
Regd.No. 114-2023-1077 So		4	
residing at Barnala Who has produced evidence before Training as per ordinances framed New Delhi.	State Pu	yab is entitled to receive to	he Practical
Date June 2 4 Va	(Name of Trainer) e Hospital / Laborat	tory) as my trainer for the entire period of my tr	the above aining.
			Binuran
	Section III	Stu	ident
(Name of Trainer) (Name of Him/her training facilities in my acquire:-	Man Kumanias a	trainee and I agree to g	
Working knowledge of keeping Practical Experience in, Sample collection, processing Precautions to be taken in clinic) Hematological analysis. Biochemical analysis of various Microbiological analysis of same	and preservation. lical laboratory s samples.	linical laboratory.	
	1		
I also agree that a trained techno	Section IV		f Institution
spread overO.A.Lmonths in a	accordance with detail	Head of the Training I	III
	Section V	Ve Civil I	lospitar barriara
I certify that Simlar practical training as per ordinance from UGC New Delhi.	Kumau has es framed by Punjabi	completed in all response	ect his/her
Date 1 July 24 Non	dur		0
Noda	Officer (MLMDT)	S.D.Colleg	cipal e, Barnala

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIST



				Bracins
This form has been issued to Mr./Ms	Sharkar	GINE &	3.D. C-"	DA BILL
			kumar	
Regd.No. 114-2022-968 Son of	0		Kumou	
Who has produced evidence before Training as per ordinances framed by New Delhi.	me that He/She	is entitled to ty, Patiala, und	receive the P ler the rules fr	Practical om UGC
Date 1-7-2024 Nand	o~		-	0
Nodal Off	icer		Principa	In .
B Voc (ML	MDT)		S.D.College, B.	Principal
	Section II		S.D. Colleg	e, BARNALA
a Obaskan one Ros	The Comb	lak Co	The state of the s	o, onitioner
(Name of Student) (Name of the H training and agree to obey and respec	O(Name of Trainer) ospital / Labora	itory) as my	trainer for the	a above
			V	AT-
			Break	F
	Section III		- Constant	
I familt shook accept Charles	9000			
(Name of Trainer) (Name of St Him/her training facilities in my orga	tudent)			she may
acquire:-				
1. Working knowledge of keeping of re	cords related to	clinical laborat	ory.	
2. Practical Experience in,		THE RESERVE OF THE PARTY OF THE	E(42)	
 a) Sample collection, processing and b) Precautions to be taken in clinical 				
c) Hematological analysis.	innovatory			
d) Biochemical analysis of various sa				
e) Microbiological analysis of sample	5, 1			
I also agree that a trained technologi	st shall be assign	ed for his/her	ahidance Labe	Catory
			(MIL)	+
		(App	rentice Master	Prop.
	Section IV	Name and	address of In	stitution
Λ .			-	
I certify that has months in acco	rdance with deta	is undergone ils enumerated	in section III	training
		Head of the	ok Sewa Labo	ratory retion
	Section V		100	Prop.
I certify that	has	completed in University, F	n all respect Patiala, under t	his/her
from UGC New Delhi.	1/		d	rincipal
Date 31-7-2029 Va	Mary Comment		THE RESERVE OF THE PARTY OF THE	100000000000000000000000000000000000000
Nodal Of			S.D. College	
B Voc (M	LMD1)		S.D.College, B	er mend

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIS



This form has been issued to Mr./Ms	SECTIONI	S.D. College,	4
		D-10 1. D1	
Regd.No. 114-2022 - 900 Son of			_
who has produced evidence before Training as per ordinances framed by New Delhi.	me that He/She	s entitled to receive the	Practical from UGC
Date 03-07-24	dur	0	0
Nodal Off	CONTRACTOR OF THE PROPERTY OF	Princi	mar /
B Voc (ML	MDT)	S.D.College,	Carried Control of Con
	Section II	S.D. College	Principal
I Palak accept M		S.D. College,	BARNALA
(Name of Student) (Name of the H training and agree to obey and respec	(Name of Trainer) ospital / Labora	tory) as my trainer for t	he above ning.
		Pa	lak.
		Stud	ent
	Section III		
(Name of Trainer) (Name of St Him/her training facilities in my orga acquire:-	udent)		
1. Working knowledge of keeping of re 2. Practical Experience in, a) Sample collection, processing and b) Precautions to be taken in clinical c) Hematological analysis, d) Biochemical analysis of various sa e) Microbiological analysis of sample.	preservation. laboratory mples.	linical laboratory,	
	1		
I also agree that a trained technologis	st shall be assigned	(Apprentice Maste Name and address of I	
0 0	The second secon		
spread over	dance with detail	s undergone! 8.9 hours s enumerated in section II	training
	Section V	Head of the Traiging 7 mi	Bloss Officer
I certify that	bas	completed in all respect	pital Barnala his/her the rules
Date 04-08-24 Vande	~	0	0
Nodal Offi	icer	Princip	To .
B Voc (ML)		S.D.College,	COST TO SECURITY OF THE PARTY O
	10.000000	0.000 minute # 500 0	Principal

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIS

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	SECTIONI	Princi
This form has been issued	to Mr./Ms. Tagfret No	rayan strotal mora marrian
Regd.No. 114-2022 - 9	Son of /daughter of Sh	Ram yash
residing at Baunch	State Luy	s entitled to receive the Practical Patiala, under the rules from UGC
Date 1.7.29	Vander	00
Date	Nodal Officer	Principal
	B Voc (MLMDT)	S.D.College, Barnala
	Section II	S.D. College PASSA
Name of Stydent) Laboratory (New training and agree to obe	(Name of Trainer) \	S.D. College, BARNALA Ory) as my trainer for the above ne entire period of my training.
. ^	Section III	
(Name of Trainer) Him/her training facilitie acquire:-	(Name of Student)	trainee and I agree to give uring his/her training he/she may
	keeping of records related to cl	inical laboratory.
Practical Experience in Sample collection, pr	rocessing and preservation.	
b) Precautions to be tal	cen in clinical laboratory	
 d) Hematological analysis 		
e) Microbiological analy		
I also agree that a train	ed technologist shall be assigned	
		Puniah Computerised Laboratory (Apprentice Master) Name and address of Institution
		Name and address of Institution
	Section IV	100
I certify that Jag ped spread over	Narayan Sungla has	Puniab Computerised Laboratory
	Section V	Head of the Indiana Institution
4	a balas Pal	
I certify that	ordinances framed by Punjabi	completed in all respect his/her University, Patiala, under the rules
Date 31.7.24	Vandor	011
Date	Nodal Officer	Principal
	B Voc (MLMDT)	S.D.College, Barnala Principal

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOG

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D. College, BARRACA
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Principal Principal
D. College, BARNALA
er for the above my training.
Naudeep Sings
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ince. Highes Computerised Laborate Heam Sixed Prospital BARNAI ress of Institution
O. hours training ection III
ring Institution and Instituti

ST Callege BARNALA

	SECTION I		
This form has been issued to Mr./Ms	Navdier	Sengh	S.D. College, SHARAL
Regd. No. 114-2022-862 Son of /d			
0 1	State	curiab e is entitled to	receive the Practical
Date 1: 8:24 Vande			-0
Nodal Office	ar .		Printpa
B Voc (MLMI	T)		S.D.College, Barnala Princip
	Section II		S.D. College, BARNAL
(Name of Student) (Name of Student) (Name of the Hos training and agree to obey and respect h	Name of Trainer pital / Labor	atory) as my	trainer for the above
			Naudue P SIX
	Section III		
(Name of Trainer) (Name of Studenthim/her training facilities in my organiacquire:	lent)		
1. Working knowledge of keeping of reco 2. Practical Experience in, a) Sample collection, processing and pr b) Precautions to be taken in clinical lal c) Hematological analysis. d) Biochemical analysis of various sample) Microbiological analysis of samples.	eservation. boratory	clinical taborat	tory.
I also agree that a trained technologist :	ihali be assigr	(Арр	Etiglide Computerised Laborenthicam Savelrijuspital BAR
	Section IV	Name and	d address of Institution
I certify that Navdcap Syspead over Since months in accordance	ngh	as undergone	1 in section III
I certify that Naudool Single practical training as per ordinances fram from UGC New Delhi.	Section V has ned by Punjal	completed in	Training Institution atory School September 1 Septembe
Date 31.8.24 Vandar			00
Nodal Office	Trans.		Principal
B Voc (MLMI)T)		S.D.College, Barnplancipal

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGI:

This form has been a section i	2 * / *
This form has been issued to Mr./Ms. Shimal	S.D. College Banks
This form has been issued to Mr./Ms. Shemal & Regd.No.114-2022 - 870 Son of /daughter of Sh.	labbar saile
residing at Bound le State	101
Who has produced evidence before me that He/She is Training as per ordinances framed by Punjabi University, I New Delhi.	
Date. 1. 7.24 \\nuder	. 0
Nodal Officer	a Bolon
B Voc (MLMDT)	S.D.College, Barnala
Santian TT	Principal
SP. O C o J. Section II	
1 Shimal Saif! accept Me Litt Sink	of Khungi Leb
(Name of Trainer)	at an unit to the contract of
training and agree to obey and respect him/her during the	entire period of my training.
	_ ^
	Thina Souti
Section III	Student, U
(Name of Trainer) (Name of Student) as a tra	
nim/ner training facilities in my organization so that duri	ing his/her training he/she may
acquire:-	
Working knowledge of keeping of records related to clinic Practical Experience in the second secon	cal laboratory.
Practical Experience in, Sample collection, processing and preservation.	
Precautions to be taken in clinical laboratory	
c) Hematological analysis.	
d) Biochemical analysis of various samples. e) Microbiological analysis of camples.	
e) Microbiological analysis of samples.	Hampwest Shoot
Tales and the same state of th	Manager Cinch Klausmi
I also agree that a trained technologist shall be assigned for	med. Technologist
	Khurmi Computerised Lab
	(Apprentice Basta)a148101(Pb.) Name and address of Institution
I certify that Shind Suff has un	reality and address of Institution
I certify that Shimal South	tos
spread over	dergone
and actuals en	umerated in section III
	Month Khurmi
A Section V	and of the Trainin Manufact Singh Khurmi Med. Technologist Med. Technologist Med. Technologist Computerised Lat.
Do 1 000.	Med. Technologist Med. Technologist Med. Technologist Computerised Lat Persity Patiala under the middle and the
practical training as per ordinances framed by Punjabi Univ from UGC New Delhi.	versity, Patiala, under the rules
Date 31.7.24 Vandan	
Nodal Officer	Ol /
Trodai Officer	Principal

B Voc (MLMDT)

S.D.College, Barnala Principal

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIST

This form has been issued to Mi	SECTION I f./Ms. Indyaan prest Son of /daughter of Sh. Auto	Sing D. Colle
1111 2 525 - 9111	- Alta	Single
Regd.No. 114-2021-114	Son of /daughter of Sh. INTIVIO	ex bugn
who has produced evidence to	State Puyah perfore me that He/She is entitle med by Punjabi University, Patiala	ed to receive the Practical
Date 1.7.24	3 Andor	00
	odal Officer	Principal
8 \	/oc (MLMDT)	S.D.College, Barnala
n	Section II	Ş.D. College, BARNALA
" (Name of Student)" (Name of	(Name of Trainer) the Hospital / Laboratory) as respect him/her during the entire	my trainer for the above
		Lind Jun meet find
	Section III	
(Name of Trainer) (Name	me of Student)	and I agree to give
	my organization so that during hi	is/her training he/she may
2. Practical Experience in, a) Sample collection, process	ing of records related to clinical la	boratory.
 b) Precautions to be taken in c) Hematological analysis. 	Clinical laboratory	
d) Biochemical analysis of va-	rious samples.	
e) Microbiological analysis of	samples.	I Prout Sink
	1	Managet Singh Khurmi
I also agree that a trained tec	samples. hnologist shall be assigned for his	her guidance Med. Technologist
		(ApprenticeMastde)148101(Pb.)
	Nam	e and address of Institution
1 1	Section IV	
I certify that	in accordance with details enume	gone
	O Head o	Manning Institution Med. Technolog
for I	Section V	Khurmi Computerised L
practical training as per ordin	Section V A PL Graph has completed ances framed by Punjabi University	ted in all resperantial 46101(P
from UGC New Delhi.	11. 1	00
Date31724	Vandar	Blinday
	Voc (MLMDT)	S.D. College, Barnalaincipal

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIST

	SECTIONI	Principal
This form has been issued to Mr./Ms		
Regd.No. 114-2012-896 Son of	/daughter of Sh. Pavina	ndan Choubly
who has produced evidence before training as per ordinances framed by New Delhi.	me that He/She Is entitled	
Date 1:7:24 Nodal Off B Voc (ML	The state of the s	S.D.College Barnala
	Section II	S.D. College, BARNALA
IKOAMKUMALU accept) \$4	(Name of Trainer) ospital / Laboratory) as my	y trainer for the above
		Student "
	C	Student ()
the same and the same and	Section III	
(Name of Trainer) (Name of St Him/her training facilities in my orga acquire:-	tudent)	
Working knowledge of keeping of reg. Practical Experience in, a) Sample collection, processing and b) Precautions to be taken in clinical c) Hematological analysis. d) Biochemical analysis of various sa e) Microbiological analysis of sample	preservation. laboratory mples. s.	
I also agree that a trained technologic		The state of the s
		oprentice Master)
	Section IV	the state of the s
I certify that	has undergon rdance with details enumerat	e .I.O hours training ed in section Ist
	Head of t	he Training Institution
I certify that Kajal Ke practical training as per ordinances f from UGC New Delhi.	masa completed	in all respect his/her Patiala, under the rules
Date 31. 7.24	, do	90/
Nodal Of	ficer MDT)	S.D.College, Barnaprincipal
B Voc (MI	LAD!)	Proveniedet numbelilleibai

S.D. College, BARNALA

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIS

	SECTION I	4	July 1
This form has been issued to Mr./Ms	Amandeep	Kauss.D. Coll	ere, BARNALA
Regd.No. 114-2012-878 Son of	/daughter of Sh	Jaggeet Sin	gh
residing at Balkencla	state Punio	th of	,
Who has produced evidence before Training as per ordinances framed by New Delhi.	me that He/She is	entitled to receive	
Date 1.7.24 Name	lan	1	00/
Nodal Off	0.00000		incipal
B Voc (ML	MDT)	S.D.Colle	ge, Barnala Princip:
	Section II	S.D. Co	llege, BARNALA
I. Amandul Kaur accept DH	Paris Charles		Contract of the Contract of th
	(Name of Trainer)	orogueratew.sciapece	1405
training and agree to obey and respect	ospital / Laboratory		
		2	Imandul Hudent Kaus
	Section III	S	tudent (AM)
	200		
I. L. M. Karly Madaccept Am And (Name of Trainer) (Name of St Him/her training facilities in my orga acquire:-	udent)	_	_
1. Working knowledge of keeping of re	cords related to clini	cal laboratory.	
Practical Experience in, Sample collection, processing and Precautions to be taken in clinical			
 c) Hematological analysis. d) Biochemical analysis of various sa e) Microbiological analysis of sample 			
	1		
I also agree that a trained technologis	st shall be assigned f	or his/her guidance	A Sun Application
		(Apprentice M	ster) Sec
		Name and address	
	Section IV		
I certify that		ndergone	ours training
		OR RAJ	A CONTRACT
	Section V	lead of the Training	Institution
Non-a ala	CONTRACTOR OF THE PARTY OF THE	Ex	Sample Bring
I certify that	A CHAN has con	mpleted in all res niversity, Patiala, ur	pect his/her ider the rules
	Jun 1		00
Date31.7.29	licar		incipal
Nodal Off B Voc (ML	Control of the contro	S.D.Colle	ege, Barnalarincipal
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RD College BARNAL

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGI

SECTION I	The same of the sa
This form has been issued to Mr./Ms. Tauhpret Ko	
Regd.No. 114-2021-885 son of /daughter of Sh. Niv	mal Singh
who has produced evidence before me that He/She is enti Training as per ordinances framed by Punjabi University, Patia New Delhi.	tled to receive the Practical ala, under the rules from UGC
Date 7.6.24 Vandor	00/
Nodal Officer	Principal
B Voc (MLMDT)	S.D.College, Barnpincip
Section II	S.D. College, BARNAL
I TOYSH D'rut Kaw accept Qu. Rapin Chaule of	Abea hashilas
(Name of Student) (Name of Trainer) (Name of Trainer) (Name of the Hospital / Laboratory) a training and agree to obey and respect him/her during the ent	s my trainer for the above ire period of my training.
	Jasehpee
	Student
Section III	
(Name of Trainer) (Name of Student) Him/her training facilities in my organization so that during acquire:-	
1. Working knowledge of keeping of records related to clinical 2. Practical Experience in, a) Sample collection, processing and preservation. b) Precautions to be taken in clinical laboratory c) Hematological analysis. d) Biochemical analysis of various samples. e) Microbiological analysis of samples.	laboratory.
I also agree that a trained technologist shall be assigned for h	(Apprentice Master)
	ime and address of Testitution
Section IV	Operan
I certify that TOMShiphut Kaust has under spread over months in accordance with details enur	ergonel. 60 hours training merated in section III
Head	d of the Training Institution
Section V	Consult Wall
I certify that	eted in all respect his/her
Date 7, 7,24 Vandor	0//
Nodal Officer B Voc (MLMDT)	S.D.College, Barnala

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIS



Principal S.D.College, Harindipal

3.D. College, BARNALA

	SECTION I	
This form has been issued to Mr./Ms	Honey	S.D. College
Regd.No. 114 - 2022 - 902 Son of /	daughter of Sh.	Smarinath
residing at <u>Bathinda</u> Who has produced evidence before n Training as per ordinances framed by P New Delhi.	ne that He/She	is entitled to receive the Practical y, Patiala, under the rules from UGC
Date 01:07:24 Vand Nodal Office B Voc (MLM		Principal S.D.College, Barnala
	F	Prin
I	Name of Trainer) spital / Laborat	S.D. College, BARIWIL of Life Care Loeb, (Dr Par tory) as my trainer for the above the entire period of my training.
		- Warry
	12-01-01-01-01	Student
	Section III	
(Name of Trainer) (Name of Stu Him/her training facilities in my organ acquire:-	dent)	trainee and I agree to give during his/her training he/she may
Working knowledge of keeping of rec Practical Experience in, Sample collection processing and a		linical laboratory.
 a) Sample collection, processing and p b) Precautions to be taken in clinical la 	reservation.	
c) Hematological analysis.	WALLEY CO.	
d) Biochemical analysis of various sam		1 4
 e) Microbiological analysis of samples. 		Campbet Singh
	1	Cample
I also agree that a trained technologist	shall be assigned	d for his/ber gridendeaboratory Gurpreet Singh B.Sc., MLT (PTU)
		(Apprentice Master) lone.
		AND THE RESIDENCE OF THE PARTY
	Section IV	2 1 +50
I certify that Hours	has lance with details	undergone!R.D., bours training senumerated in section III Life Care Laboratory
		Gurpreet Singh
	Combine to	Head of the Training Enshitution
	Section V	incide (M. Partap Nursing Home,
I certify that	med by Punjabi	completed in all respect his/her University, Patiala, under the rules

Nodal Officer B Voc (MLMDT)

Date. 4/: 0.8:24

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIS



The face bear from Second	d to Mr./Ms. Simeaujit	S.D. College, BARNALA
This form has been issue	d to Mr./Ms. SITINGLE	11
Regd.No. 114 - 2011 -	866 Son of /daughter of Sh. Br	ilder singu
residing at hule who has produced evid Training as per ordinance New Delhi.	State CLYO lence before me that He/She is o les framed by Punjabi University, P	entitled to receive the Practical
Date \$ 3 07-24	Vandou	00.
	Nodal Officer	S.D.College, Barnala
	B Voc (MLMDT)	Principa
0. 01.	Section II	S.D. College, BARNAL
(Name of Student)	(Name of Trainer) me of the Hospital / Laboratory ey and respect him/her during the	entire period of my training.
	Santian III	Student
white	Section III	1
(Name of Trainer) Him/her training faciliti acquire:- 1. Working knowledge o 2. Practical Experience is a) Sample collection, p	rocessing and preservation. ken in clinical laboratory sis. s of various samples.	ing his/her training he/she may
I also agree that a train	ed technologist shall be assigned f	or his/her guidance. Yawwi 1 T (Apprentice Master)
		Name and address of Institution
31	Section IV	
I certify that	nonths in accordance with details e	ndergone
		Turtann
I certify that	Restaurable Visites	Senior Medical Officer Senior Medical Officer Vc Civil Hospital Barnala mpleted in all respect his/her niversity, Patiala, under the rules
Date 64-28-24	Jandar	OP -
The state of the s	Nodal Officer	Principal
	B Voc (MLMDT)	S.D.College, Barnala

Principal

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIS

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S.D.College, Barnala

Principal

SECTION I	SD C " Printel
This form has been issued to Mr./Ms. Aushdeep Singh	S.D. College BARN
Regd.No. 114-2022-860 Son of /daughter of Sh. House	v Singh
who has produced evidence before me that He/She M entitled in Training as per ordinances framed by Punjabi University, Patiala, un New Delhi.	to receive the Practical
Date 8.8. 24 Vander	00
Nodal Officer B Voc (MLMDT)	Principal S.D.College, Barnala
Section II	Princip
1 Alshdeep Singh accept Ms Karnni or Civil	S.D. College, BARNA
(Name of Student) (Name of Trainer)	trainer for the above
	Arshdeeb Singf
Section III	Stantin.
(Name of Trainer) (Name of Student) Him/her training facilities in my organization so that during his/hacquire:-	
1. Working knowledge of keeping of records related to clinical labora 2. Practical Experience in, a) Sample collection, processing and preservation. b) Precautions to be taken in clinical laboratory c) Hematological analysis. d) Biochemical analysis of various samples. e) Microbiological analysis of samples.	atory.
I also agree that a trained technologist shall be assigned for his/her	guidance Camula II
	orentice Master) d address of Institution
I certify that Anshaech Singh has undergone spread over and months in accordance with details enumerate	.No hours training d in section III
Section V CO. 6	ਸਵਲ ਹਸਪਤਾਲ ਬਰਨਲਾ
I certify that	n all respect his/her
Date 8. 9. 24 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
Nodal Officer	p. Dright

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGI

SECTION I	S.D. College, 8 4
This form has been issued to Mr./Ms. Shivcho	wan Singh
Regd.No. 114-2012 - 871 Son of /daughter of Sh	. Jogendue Singh
A .	evis entitled to receive the Practical
Date 8:8:24 Vandar	00
Nodal Officer	Principal
B Voc (MLMDT)	S.D.College, Barnala Principal
Section II	S.D. College, BARNALA
1 Shirchalan Sighaccept Ms. Kamni	or Civil Hospial
(Name of Student) (Name of Trainer	ratory) as my trainer for the above
	2/2
Continue TTT	Student
Au kan a Cara Lan Cara	
(Name of Trainer) (Name of Student) Him/her training facilities in my organization so that acquire:-	
1. Working knowledge of keeping of records related to 2. Practical Experience in, a) Sample collection, processing and preservation. b) Precautions to be taken in clinical laboratory c) Hematological analysis. d) Biochemical analysis of various samples. e) Microbiological analysis of samples.	clinical laboratory.
Take and that a testand to be started to the starte	
I also agree that a trained technologist shall be assign	(Apprentice Master)
Section IV	Name and address of Institution
I certify that Shiv Chanan Singh h spread over encommonths in accordance with det	as undergone
I certify thatShivchanan Sixyl	Head of the Tendrice ਸਿਭਾ ਸਿੰਗ ਹੈ ਇੰ: ਸਿਵਲ ਹਸਪਤਾਲ ਬਰਨਾਲਾਂ s completed in all respect his/her
practical training as per ordinances framed by Punja from UGC New Delhi.	bi University, Patiala, under the rules
Date 8 9 24 \andr	00
Nodal Officer	Principal
B Voc (MLMDT)	S.D.College, Barnala

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIS



This form has been issued to Mr./Ms	SECTION I	S.D. College, BAKINALA
It to a second to Mr./Ms.	sypus orn	94
Regd.No. 114-2022-1016 Son of	STATE OF THE PARTY	The state of the s
residing at Bounda. Who has produced evidence before Training as per ordinances framed by	State Runja me that He/She is Punjabi University	entitled to receive the Practical
New Delhi.	and an annual state of the	within ander the rules from occ
Date a1:07:24 Van	w/	00
Nodal Off		Principal
B Voc (ML	MDT)	S.D.Coffege, Barnala
	Section II	S.D. College, BARNALA
. Total chat. Bu	but et al	L'Is cont de la la missa
(Vame of Student)	(Name of Trainer)	orlife same Laboratory (Dr. Porta
training and agree to obey and respect	ospital / Laborator	v) as my trainer for the above
		T/ 1 01 01
		Student Smyh
	Section III	Student
(Name of Trainer) (Name of St Him/her training facilities in my orga acquire:-	udent)	CONTROL OF THE PARTY OF THE CONTROL
1. Working knowledge of keeping of re	cords related to clin	ical laboratory
2. Practical Experience in,		
 a) Sample collection, processing and b) Precautions to be taken in clinical 	preservation.	
c) Hematological analysis.	laboratory	0.
d) Biochemical analysis of various sai		, ough
e) Microbiological analysis of sample:	5.	or his her quidance Carband Single
	1	laurbee
I also agree that a trained technologis	t shall be assigned f	or his/her guidance.
		Life Care Laboratory
		Gurpreet Singh (Apprentice Master) (PTU)
		Name and address of agricusion
	Section IV	Bamals-148101 (Rb.)
I certify that Tabal Singh spread over Oak months in accor		Name and address of agricultion Bamals-148101 (Pb.) ndergone
		Life Care Laboratory
		lead of the Training Instructionsh
	Section V	B.Sc. MLT (PTU)
I certify that I appal line	0	maide Dr. Partap Nursing Home.
I certify that		mpleted in all are specifically like in all are specifically patials, under the rules

Nodal Officer B Voc (MLMDT)

Date. A.L. A.S. 24

S.D.College, Bapyancipal

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGI:

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	SECTION I			20
This form has been issued to	Mr./Ms. Lovedeeb	Eingh	S.D. College	Princin
Regd.No. 114-2022-87	Y Son of /daughter of Sh.	Jasin	Singh	T residente
residing at Roundle Who has produced evidence Training as per ordinances to New Delhi.	State / with	is entitled to	receive the	
Date	Vander		m.	0
Date	Nodal Officer		Princip	at /
	B Voc (MLMDT)		S.D.College, B	Princip
	Section II		S.D. College	The state of the s
1. Lovedeepsingh. a	(Name of Traider) of the Hospital / Labora	or frien	ds.Comput	tisised
training and agree to obey a	and respect him/her during	the entire perio	od of my train	ing.
			Love	edeel Sing
	Section III			
(Name of Trainer) (I Him/her training facilities i acquire:-	Name of Student)			she may
Working knowledge of ke Practical Experience in,	eping of records related to	clinical laborat	огу.	
a) Sample collection, proce				
 b) Precautions to be taken c) Hematological analysis. 				
 d) Biochemical analysis of e) Microbiological analysis 				
	1			
I also agree that a trained f	echnologist shall be assigne	ed for his/her	guidance.	- Jane
			The state of the s	polarni
		Friends	entice Master address of In	RNALI
		Name and	address of In	Stitution
	Section IV		address of In	M
I certify thatLove of spread overmont	the in accordance with detail	s undergone . Is enumerated	in section III	13 .
		Head of the	Training Insti	ALANDINA
	Section V			
I certify thatLOVEO		completed in University, Pa		

Nodal Officer B Voc (MLMDT)

Date ... 01-08:24

S.D.College, Barnala Principal

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIS

		-
	SECTION I	2.2
This form has been issue	d to Mr./Ms. Sukhuis kau	S.D. College BARDIA
	Son of /daughter of Sh. 6/W	CAD. COINCE A BARTIE INC.
		Ande Sirgh
who has produced evide	ence before me that He/She is ent	itled to receive the Practical
Training as per ordinance	es framed by Punjabi University, Pati	ala, under the rules from UGC
New Delhi.	a) dos	0.0
Date.!-7-2624	Nodal Officer	Plan
	B Voc (MLMDT)	S.D.College, Barnala Princip
	Section II	S.D. College, BARNAL
1 Sukhula kaua	accept . P.n. Shamshad of .	
(Name of Student)	(Name of Trainer)	THE RESERVE OF THE PARTY OF THE
training and agree to obe	me of the Hospital / Laboratory) is and respect him/her during the ent	as my trainer for the above tire period of my training.
		Rukhvin Ican
		Student
S 20 0 160	Section III	
1.Pm. Shamshaid, accept	ot Sukhvia Kowa as a traine	ee and I agree to give
(Name of Trainer) Him/her training facilitie	(Name of Student) s in my organization so that during	his/her training he/she may
acquire:-	The state of the s	may ner training ney site may
1. Working knowledge of	keeping of records related to clinical	laboratory.
2. Practical Experience in	ocessing and preservation.	
b) Precautions to be tak	en in clinical laboratory	
 c) Hematological analys d) Biochemical analysis 		
e) Microbiological analys		7
	1	M
I also agree that a traine	d technologist shall be assigned for h	is/her guidance MAD
		(Marian)
		(Apprentice Master)
	Section IV	me and address of Institution
V Cut	hule Louis	100 . / 1 - nd
spread over	nuilli caust has unde	nerated in section III
		Gen. 10 No.13 A8304
	Head	of the Training Institution
0 .	Section V	
I certify that	ordinances framed by Punjabi Univer	eted in all respect his/her rsity, Patiala, under the rules
Date 31 - 7-2024	1 1	00
Date	Nodal Officer	e - Principal
		N D Callibrat

B Voc (MLMDT)

s.B. Conege Barnatanala

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIS

					100 0
		SECTION I	, 0		Princip
This form has been issu			100	S.D. College	
Regd.No. 114-2012 -	- 863 Son of /	daughter of	sh. Jateno	Ler kuma	ч
residing at Royal Who has produced evi Training as per ordinan New Delhi.	ala dence before me	State	Punjah	to receive the	Donation
Date 1.08.24	Nodal Office			RE	2
	B Voc (MLMI	The state of the s		S.D.College, E	al Barnala
	_	Section II		S.D. College	Princip
I Yetish Jain (Name of Student) (Name of Student) (Name of Student) (National Student) (National Student)	ame of the Hos	lame of Trains	er)	jas Compri	terised
				yatish	gain
0		Section III		Studer	nt 2
(Name of Trainer)	ept Yalish (Name of Stud	ent)		d I agree to give	
Him/her training faciliti acquire:-	es in my organia	tation so the	at during his/	her training he/	she may
1. Working knowledge of 2. Practical Experience is a) Sample collection, p. b) Precautions to be tac) Hematological analysis e) Microbiological analysis e)	n, rocessing and proken in clinical lab sis. s of various samp	eservation. oratory	o clin i cal labor	atory.	
	1				
I also agree that a train	ed technologist s	hall be assig	The second secon		
		Section IV	Name	opren 66Zmaste r) opren 66Zmaste r) od address of Ins	Hysipm L
I certify that	tr'sh Jain onths in accorda	nce with det		NE1239	training
I certify that	tiel Jain	Section V	Rami	putelland design	UHOW _
practical training as per from UGC New Delhi.	ordinances fram	ed by Punja	s completed bi University,	in all respect Patiala, under th	his/her ne rules
Date 31.08.24	Manda			4	2km
,	Nodal Officer			e p Principa	rincipal
	B Voc (MLMD	r)		F.B.Conegg, B.	HAMAIA

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIS

	SECTION I	kann -	
This form has been issued to Mr./Ms			0
Regd.No. 14-2012-884 Son of	/daughter of Sh.	Gwinel	Singh
who has produced evidence before in Training as per ordinances framed by New Delhi.	State Cur ne that He/She Punjabi Universi	is entitled to ty, Patiala, und	receive the Practical er the rules from UGC
Date.1 - 7-2024 Vom Nodal Offi B Voc (ML)	T. T. T. L.		Principal S.D.Coffege, Barnala
	Section II		Principal
Sukhula kara	The state of the s	-1	S.D. College BARNAL
(Name of Student) . Indian accept . Name of the Hetraining and agree to obey and respect	(Name of Trainer) ospital / Labora	story) as my t	rainer for the above
			Rychurg Laces
	Section III		Student
(Name of Trainer) (Name of St Him/her training facilities in my orga acquire:-	A. LOUAL as	1400	- 1-
1. Working knowledge of keeping of re 2. Practical Experience in, a) Sample collection, processing and b) Precautions to be taken in clinical c) Hematological analysis. d) Biochemical analysis of various same e) Microbiological analysis of samples.	preservation. laboratory mples.	clinical laborato	iry.
I also agree that a trained technologis	t shall be assign		IR. SHAMSICIAN
			natice Master) TAL
	Section IV	G	Bewat Consum a
I certify that Suthidd	dance with detail	s undergone	n section 11 8 8 304 Rection 13 8304 raining Institution
		Head of the T	raining Institution
Capting to the Control of the Contro	Section V		
I certify that	has amed by Punjab	completed in i University, Pa	all respect his/her tiala, under the rules
Date 31-7-2024 Val	~		Soft.
Nodal Offi	And the second		S.D. Cincipal Principal
B Voc (MLI	MDI)		s.D.College, Barnafa deld

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGI

ar A a a a	
PAGINAT -	

S. S. C. College, Barriala

	SECTION I	The same of the same of	Proce
This form has been issued to Mr./M	s. Apashde	ep Sings.D.C	ollege, BARNA
Regd.No. 114-2022-861 Son			Single.
residing at <u>Roundla</u> . Who has produced evidence befor Training as per ordinances framed New Delhi.	State Pu	ujab	e the Practical rules from UGC
Date 1.08.24 Va	ndun		00
Nodal (Officer MLMDT)		rinemat
		S.D.Col	lege, Barnala
011.11.69	Section II	SDC	Princip pliege, BARNAL
Bon Nation (Name of the training and agree to obey and response	Hospital / Labor	or Founds Com	Olderwal Jahon
			Student
Name and the second	Section III		Augh look Co
(Name of Trainer) (Name of Him/her training facilities in my or acquire:-	Studenti		
Working knowledge of keeping of Practical Experience in, Sample collection, processing and	d preservation	clinical laboratory.	
 b) Precautions to be taken in clinical c) Hematological analysis. 	al laboratory		
d) Biochemical analysis of various s	samples.		
e) Microbiological analysis of samp	les.		

I also agree that a trained technolog	ist shall be assign	ed for his/her guidance	PSING
		(Apprentice M	
	Section IV	Name and names	Spital BARNALA
I certify that AKAHAMA Any spread over	bha ordance with detail	s undergone 150 h Is enumerated in sectio	
	Section V	Head of the Training	oital BARNALA
I certify that DKOUNGS RIN	ah ha	completed to the	
practical training as per ordinances from UGC New Delhi.	framed by Punjabi	University, Patiala, un	der the rules
Date31.08:24	notes		DR.

Nodal Officer B Voc (MLMDT)

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIS

CECTION	Principal
This form has been issued to Mr./Ms. Jagge	O.D. College RAPNALA
Regd.No. 114-2022 - 1017 Son of /daughter	
residing at <u>Baunala</u> State Who has produced evidence before me that H Training as per ordinances framed by Punjabi Un New Delhi.	Punjah e/She/is entitled to receive the Practical
Date 1:08:24 Vandor	00
Nodal Officer B Voc (MLMDT)	Principal Special
	S.D.College, Barnala Princip
Section	0
(Name of the Hospital /	rainer) Laboratory) as my trainer for the above
training and agree to obey and respect him/her of	
	Storien Jae Van
Section	Ш
(Name of Trainer) (Name of Student) Him/her training facilities in my organization so acquire:-	as a trainee and I agree to give that during his/her training he/she may
1. Working knowledge of keeping of records related. Practical Experience in, a) Sample collection, processing and preservation by Precautions to be taken in clinical laboratory c) Hematological analysis. d) Biochemical analysis of various samples. e) Microbiological analysis of samples.	The state of the s
1	
I also agree that a trained technologist shall be a	For Punjab Hi-Tech Laboratory (Apprentice Master) Name and address of Institution
Section	rv Prop.
I certify that Tag jeevan Singh spread over one months in accordance with	details enumerated in section III
Section	Hearne Planning Institution
Tonioniu O 1	has completed in all respect his her
Date 31.8.27 Vaul	Q.C.
Nodal Officer B Voc (MLMDT)	S. Do College, Baratria

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIS

SECTION I	Thousan .
This form has been issued to Mr./Ms. Kulwind	ex. Kour S.D. College, Barrier
Regd.No. 114-2012 - 891 Son of /daughter of	sh. Swifeet Singh
residing at Rathinda State Po	wiah "
Who has produced evidence before me that He/S	havis antitled to resolve the many
Training as per ordinances framed by Punjabi Unive New Delhi.	rsity, Patiala, under the rules from UGC
01 1	0
Date. J. D. Bialy Vander	0.//
Nodal Officer	Principal
B Voc (MLMDT)	S.D.College, Barnala
Section II	S.D. College, BARNALA
I Kulupindu Kau screet & Towart &	
(Name of Student)	or or of the production of the
""" I have of the Hospital / Lab	pratory) so my tuning for the -t
training and agree to obey and respect him/her during	ng the entire period of my training.
	Kuliondiy kawi
	Student
Section III	Statute
(Name of Trainer) (Name of Student)	
Him/her training facilities in my organization so the	at during his/her training he/she may
acquire;-	The state of the s
1. Working knowledge of keeping of records related to	o clinical laboratory
z. Fractical experience in,	o contract laboratory.
a) Sample collection, processing and preservation.	
b) Precautions to be taken in clinical laboratory c) Hematological analysis.	
d) Biochemical analysis of various samples.	
e) Microbiological analysis of samples.	
1	
I also agree that a trained technologist shall be assig	ned for his/her guidance.
	6.0
	(Apprentice Master)
	Name Miss address to Differentians
Section IV	BARNALA
I certify that Kuluomder Kour	nas undergone
spread overmonths in accordance with det	alls enumerated in section III
	APEX DIAGNOSTIC LAB
	Head of the Training Astivation
Cartina M	The state of the s

8.D. College, BARNALA **Nodal Officer** Principal B Voc (MLMDT) S.D.College, Barnala

Principal

I certify that Kulunindu Koun has completed in all respect his/her practical training as per ordinances framed by Punjabi University, Patiala, under the rules

from UGC New Delhi.

Date .. 31. 2. 24.

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGI



Principal

			Principal
	SECTION I	S.D. Collen	BARNADA
This form has been issued to Mr./Ms	semaan	singh	-
Regd.No. 114-2012 - 871 Son of			the
who has produced evidence before r Training as per ordinances framed by New Delhi.		entitled to receive the	
17.24	w/	6	1
Date 1.7.24 Nodal Offi		Brind	of Cal
B Voc (MLI	Control of the Contro	S.D.College,	
	AND THE RESERVE OF THE PARTY OF		Principal
	Section II	S.D. Colleg	e, BARNALA
I. Atmacan Singh accept K	(Name of Trainer)	of Endada Laborati	ova-
training and agree to obey and respect	ospital / Laborati		
			Amoan
	Section III	Stud	ent
11.1.1 5 . 1.			
(Name of Trainer) (Name of St	udent)	trainee and I agree to giv	e
Him/her training facilities in my orga acquire:-		uring his/her training he	/she may
Working knowledge of keeping of re Practical Experience in, Sample collection, processing and Precautions to be taken in clinical Hematological analysis. Biochemical analysis of various same) Microbiological analysis of samples.	preservation. laboratory mples.	inical laboratory.	
	1		
I also agree that a trained technologis	t shall be assigned	d for his/her guidance.	
		Priends Computerised	CONTRACTOR AND
	Section IV	Kuldeep C	_
I certify that Atmam Singh spread over months in according	has	undergone hour	s training
	CONTRACTOR DE LA CONTRA		erised Laboratory
		Head of the Franching tos	PHALBARNALA
	Section V	Kuldu	2 Suly
I certify that Amount Song practical training as per ordinances fr from UGC New Delhi.		completed in all respect University, Patiala, under	
Data 31.7.2024 Vands	V		00
Nodal Off	icer	Princ	pal
B Voc (ML	57575 4	S.D.College,	Barnalá

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIST

This form has been issued to Mr./M	s. Suneh -	Kaux S.D. College, Sax Sax
Regd.No. 114-2021 - 817 Son	of /daughter of Sh.	numert Singh
residing at Bound A Who has produced evidence before Training as per ordinances framed New Delhi.	State huya	entitled to receive the Practical
Date 0.2-01-24	ander	
The property of the property o	MLMDT)	S.D.College, Barnala Principa
	Section II	S.D. College, BARNAL
ISunth Kauh accept to (Name of Student) Tech(Name of the training and agree to obey and resp	(Name of Trainer) Hospital / Laboratory	y) as my trainer for the above
		Swiner Kawn
	Section III	
(Name of Trainer) (Name of Him/her training facilities in my of acquire: 1. Working knowledge of keeping of 2. Practical Experience in, a) Sample collection, processing a b) Precautions to be taken in clinic of Hematological analysis of various e) Microbiological analysis of same I also agree that a trained technological analysis of same I also agree that a trained technological analysis of same I also agree that a trained technological analysis of same I also agree that a trained technological analysis of same I also agree that a trained technological analysis of same I also agree that a trained technological analysis of same I also agree that a trained technological analysis of same I also agree that a trained technological analysis of same I also agree that a trained technological analysis of same I also agree that a trained technological analysis of same I also agree that a trained technological analysis of same I also agree that a trained technological analysis of same I also agree that a trained technological analysis of same I also agree that a trained technological analysis of same I also agree that a trained technological analysis of same I also agree I also a	f Student) rganization so that dur f records related to clini nd preservation, cal laboratory samples. ples.	ing his/her training he/she may
	Section IV	(Apprentice Master) M.D. Patholog Name and address of Institution ital Barna
I certify thatSumPh. Kaus spread over. 1527months in ac	1has u cordance with details e	ndergone 300 hours training numerated in section III
	Section V	lead of the Training Institution 1.17 Page 100 Groves Hospital (Barno)
I certify that Sunch tou practical training as per ordinance from UGC New Delhi.		mpleted in all respect his/her
TOTAL .	MLMDT)	S.D.College, Barnala

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOG

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PTIDE 10 2022 OGB, BAISHAKSHI
Rajput
the Practical les from UGC
Principa Allege BARNAL
or the above training.
ghe Student
give g he/she may
е.
Master CENTRE
Prop. hours training
Y HEALTH SENTRE
annet his ther

Principal S.D.College, Barnata

		Principal
	SECTION I	S.D. College, BA SHAKSH
This form has been issued to Mr.	ms. shabshi	
This form has been issued to riving	The The	mout elnah Painut
Regd.No. 114-2021-816 s residing at Baunala	on of /daughter of Sh. He	mail singh sigger
Who has produced evidence be Training as per ordinances frame	State State It of the state of	itled to receive the Practical ala, under the rules from UGC
New Delhi.	Al. Am	
2 1-2-211	HOD	Principal
Date. 2.: 1:2024	oc (MLMDT)	S.D.College, Barnala
	The state of the s	at.
	Section II	Princi
T Shalshs accept	Kawhelir Shaw	CAy S.U. Conege BARNA
(Name of Student) (Name of training and agree to obey and r	the Hospital / Laboratory) espect him/her during the en	S.D. College BARNA as my trainer for the above tire period of my training.
training and agree in		
		Student
	Section III	-
Him/her training facilities in m acquire:-	y organization so that during	his/her training he/she may
1. Working knowledge of keeping	ig of records related to clinical	i laboratory.
 Practical Experience in, Sample collection, processing 	no and preservation.	
b) Precautions to be taken in o	linical laboratory	
c) Hematological analysis.		
d) Biochemical analysis of vari	ous samples.	
e) Microbiological analysis of	sampres.	
I also agree that a trained tech	nologist shall be assigned for	his/her guidance.
		FOR CATY, WEALTH CENTRE
		(Apprentice Master)
	Section IV	tame and address of small
	. 0	Prop.
I certify that	in accordance with details en	dergone\$40 hours training - umerated in section III
	He	ad of the Training Institution
	Section V	
at the		stated in all samest his than
practical training as per ordination UGC New Delhi.	ances framed by Punjabi Uni	pleted in all respect his/fier versity, Patiala, under the rules
CANADA CONTRACTOR OF CONTRACTO	Ma la	
Date. 4:3:24	10mm	Principal 0

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PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIST



This form has been issued to Mr./Ms		5.D.	Collega
Regd.No. 114-2021 - 815 son of	daughter of Sh	Pom Nimor	All the same of the same
who has produced evidence before in Training as per ordinances framed by P. New Delhi.	State	unjab	e the Practical rules from UGC
Date #2:01-24	~		
B Voc (MLM	IDT)	Princip S.D.Col	pal llege, Barnala
	Castina Tr		nego, darnala
(Name of Student) (Name of Student) (Name of the Hotraining and agree to obey and respect)			
			01
			Sabru
0	Section III		oraquit.
(Name of Trainer) (Name of Student) (Name of Student) (Name of Student) (Name of Student)	dent)	trainee and I agree to	o give
acquire:-	eation so that	during his/her trainin	g he/she may
Working knowledge of keeping of reco Practical Experience in, Sample collection, processing and property in the precautions to be taken in clinical late. Hematological analysis. Biochemical analysis of various sample. Microbiological analysis of samples.	reservation. boratory	clinical laboratory.	
I also agree that a trained technologist	shall be seen		MOLY
01	Section IV	(Apprentice Name and address	Sten
spread over	nce with detail	undergone S.D. h s enumerated in section	ours training
I certify that	Section V		Tech. Surender Sout

Principal S.D.College, Barnala

Date...04:03:24

HOD B Voc (MLMDT)

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIST



This form has been issued to Mr./Ms		S.D. College, BA	Hocipal RNALA
Who has produced evidence before r	State funjah	o receive the Practi	cal
Training as per ordinances framed by in New Delhi. Date	Section II (Name of Trainer) Sepital / Laboratory) as my	Principal S.D.College, Barnal	Principal BARNALA
danning and agree to obey and respect	Section III (1711 7) as a trainee and udent)	Student I agree to give	mari
Working knowledge of keeping of red Practical Experience in, Sample collection, processing and p Precautions to be taken in clinical in the collection of the	preservation. aboratory	tory.	
I also agree that a trained technologist I certify that	(App Name an Section IV	For CITY HEAD prentice Master) d address of Instituti	Prop.
I certify that Ray kumari practical training as per ordinances fra from UGC New Delhi.	Section V Head of the	Training Institution	er es

Principal

HOD B VOC (MLMDT

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIST



				100
This form has been leaved to to the	SECTION I	- 1	S.D. College,	ARNALA
This form has been issued to Mr./Ms				
Regd.No.114-2021-813 Son of	/daughter of SI	h. Surind	u Kumai.	
who has produced evidence before training as per ordinances framed by New Delhi.	_State	unjas		
Date 2.1.2024 NO B Voc (ML)	LAUNY .			Del
8 Voc (ML)	MDT)		Principal S.D.S.V.College	Princip
0	Section II			
Banada (Name of the Hotraining and agree to obey and respect	forming on stentiles	A CONTRACTOR OF THE PARTY OF TH	rainer for the a	bove
			Student	an
(Name of Trainer) (Name of Stu Him/her training facilities in my organ acquire:-	Section III Aud as ident) nization so that	a trainee and I during his/her	agree to give	*
Working knowledge of keeping of rec Practical Experience in, Sample collection, processing and p Precautions to be processing.	PRESENTATION	clinical laborato	ry.	
 b) Precautions to be taken in clinical is c) Hematological analysis. 	boratory		1	
d) Biochemical analysis of various sam			1	Present
I also agree that a trained back	- Linear process and the		Labor Labor	spital,
I also agree that a trained technologist I certify that POOMAM	shall be assigne	Delhi Col Beykside Beykside	MERGANCE (CS) John CO. (CS) BARNALA OT. (CS) BARNALA OT. (CS) BARNALA OT. (CS) BARNALA OT. (CS) BARNALA	878PA
0	Section IV	Name and a	didress of Institut	lop
I certify that OOMAM I certify that OOMAM practical training as per ordinances frant from UGC New Delbi	has	s undergone & senumerated in Delh	hours who	NALA 99144-49978
0	Section V	Head of the TY	aining Tagnakton	
I cortify that	- AMERICAL E		Mob. gai	
practical training as per ordinances fran	ned by Punjabi	completed in University, Pati	all respect his/l ala, under the ru	her les

HOD Vander

Principal

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIST



Principal S.D.College, Barnala

	Principal
SECTION	S.D. College, BARNALA
This form has been issued to Mr./Ms. NO.	yot kaur
Regd.No. 114-2021-812 Son of /daught	William Control of the Control of th
Politica Is for a daught	or of sh. Mayou bengu
residing at Takho-Kalar State	Panjah
Who has produced evidence before me that Training as per ordinances framed by Punjabi I New Delhi.	He/She is entitled to receive the Practical Iniversity, Patiala, under the rules from UGC
Date 2 Jan 2024 HOD	Principal
B Voc (MLMDT)	S.D.College, Barnala
Sectio	Frincis
- No Part to Robert	S.D. College, EARNAL
(Name of Student) (Name of	Trainer)
	Laboratory) as my trainer for the above
	1 h bot tous
	Student
Section Section	ш
(Name of Trainer) (Name of Student)	M.Las a trainee and I agree to give
Him/her training facilities in my organization acquire:-	to that during his/her training he/she may
1. Working knowledge of keeping of records rela	ated to clinical laboratory.
2. Practical Experience in,	
 a) Sample collection, processing and preservat b) Precautions to be taken in clinical laborator 	ion,
c) Hematological analysis.	
Biochemical analysis of various samples. Microbiological analysis of samples.	
-, and a great charges of samples.	
I also agree that a trained technologist shall be	assigned for his/her guidance.
	Rokern Kamer Jaidel
	(Apprentice Master)
Section	EISTO TOMPSTERFEED
The state of the s	LABORATORY
I certify that Naugot Kaus	has undergone 360 hours training
spread over	in details enumerated in section III
	Ralcess kuma Sinda
	Head of the Training Institution
Section	
I certify that	has completed Am CRATORY his/her Punjabi University, Patiala, under the rules
Date Alkerth 2024 Vander	

HOD

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIST



	S.D. College Barbaria
This form has been issued to Mr./Ms. Manplet /	No. of the last of
Regd.No. 114-2021-811 Son of /daughter of Sh. Rabic	it cinali
who has produced evidence before me that He/She is entitle Training as per ordinances framed by Punjabi University, Patiala, New Delhi.	<u> </u>
Date\$2::01:2.4 HOD B Voc (MLMDT)	Principal S.D.College, Barnata
Section II	S.D. College Principal
IMANDRIPE KOUST accept Gruss pareet Just of Life (Name of Student) (Name of Trainer) (Name of Trainer) as training and agree to obey and respect him/her during the entire	e cone
	Handproot Kour
Section III	Student
(Name of Trainer) (Name of Student) Him/her training facilities in my organization so that during his acquire:-	
J. Working knowledge of keeping of records related to clinical lab Tractical Experience in, a) Sample collection, processing and preservation. b) Precautions to be taken in clinical laboratory c) Hematological analysis, d) Biochemical analysis of various samples. e) Microbiological analysis of samples.	Churcherd Siny and
I also agree that a trained technologist shall be assigned for his/ incide (A	her guidances, MLT (PTU) e Dr. Partap Norsing Hon.e. Bamals-148101 (Pb.) Apprentice Master) and address of Institution
Section IV	1 1. 100
I certify that Manbacet X9191 has undergo spread over months in accordance with details enumeral Life	one 29.9 hours training attending section III a Care Laboratory Gurpreet Singh
	the Training Institution
I certify that	Barnals 148101 (Pb.) d in all respect his/her y, Patiala, under the rules

Date 04 . 03 . 24

HOD MINDT

Principal

OK,

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIST



				RY
This form has a	SECTION I	,	S.D. Colle	nncipal
rnis form has been issued to Mr./Ms	Many	rect Ka	S.D. College, BA	RNALA
Regd.No. 114 - 20 21 -985 Son of /	daughter of SI	· Jagger	Ciral	
This form has been issued to Mr./Ms	State e that He/Sh unjabi Univers	lunjab e is entitled to ity, Patiala, unde	receive the Practica	al C
Date 02-01-14 Vaule	/			
B Voc (MLM	DT)	5	Principal i.D.College, Barnala	R
CASHANAN MARKA MARKA	Section II		S.D. College, E	Princip
I Manbare of Student) Labo State Sty	LANGE OF LESSINGS	A tensor to the same	% P	
			Monpreet	Kaus
	Section III		Student	
Name of Trainer) (Name of Student Him/her training facilities in my organiacquire:-	zation so that	during his/her t	raining he/she may	10.
Working knowledge of keeping of reco Practical Experience in, Sample collection, processing and pr Precautions to be taken in clinical lai Hematological analysis.	eservation.			Λ
e) Microbiological analysis of samples.	oles.		Curped Sim	11
d) Biochemical analysis of various sample) Microbiological analysis of samples. I also agree that a trained technologist s	hall be assign	ed for his/her gu	Care Laboratory idan 6x: preet Singh B.Sc., MLT (PTU) Partap Nursing Hon.e. tisa Minitél 01 (Pb.)	
	Section IV	Name and ac		
- Halman to		s undergone .31	co. hours training section contory Gurpreet Singh	SINGL
	Section V	Head of the Tra	B Sc, MLT (PTU)	
I certify that Man seet Kours practical training as per ordinances fram from UGC New Delhi.	ed by Punjabi	8	amail-140101 ()	
Date 04:03:24 Wuln				

HOD B Voc (MLMDT)

Principal

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIS

	CATALON CONTRACTOR OF THE CATALON CONTRACTOR
SECTION	
This form has been issued to Mr./Ms. Jaya	Sharma an an
Regd.No. 1/4-202/-832Son of /daughter of	Sh. Manaland
Who has produced evidence before me that He/ Training as per ordinances framed by Punjabi University	She is entitled to receive the Practical
0.1	ratidia, under the rules from UGC
Date 2 · 1 · 23	
B Voc (MLMDT)	Principal
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Java Charman On Section II	Princip
I Jaya Sharms accept Rale K. Jee (Name of Train training and agree/to obey and respect him/her durin	or Eishu Tomputeurid
training and agree to obey and respect him/her during	oratory) as my trainer for the above
	period of my training.
(A)	Student
(Name of Trainer) (Name of Student)	Student
(Name of Trainer) (Name of Student)	s a trainee and I agree to give
Him/her training facilities in my organization so the	a de la companya de la grego
acquire:-	t during his/her training he/she may
Working knowledge of keeping of records related to Practical Experience in.	religional late
a) Sample collection processing and	clinical laboratory.
d) Biochemical analysis of various	
e) Microbiological analysis of samples.	
I also agree that a trained technologist shall be assign	ned for his/her avidance
	(Apprentice Master)
Section IV	Name and address of Institution
Louding that Takes of a	LISTO COMPOTERISED
I certify that Jaya Sharmana spread over 2 months in accordance with deta	s undergone
	Rolein Kamas Jaidy
Section V	Head of the Training Institution
I certify that Jaya sharm a has practical training as per ordinances framed by Punjabi	
and the public	University, Patiala, under the miles
Date 4.3.24 Naula	, and the rules
100-1	aP
Nodal Officer B Voc (MLMDT)	Principal (Principal

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIST



	SECTION I		Principal
This form has been issued to Mr./Ms	Amsit	picet Stagolleg	BARNALA
This form has been issued to Mr./Ms Regd.No. 114-2021-806 Son of	/daughter of Sh.	Ranjet Kingh	
who has produced evidence before in Training as per ordinances framed by New Delhi.	_State	titled to receive the Pr	ractical
Date 2.1.2624 HO	11500	Principal S.D.College, Ba	
(Name of Student) (Name of the Hotraining and agree to obey and respect	ospital / Laboratory)	S.D. College Elsku Compact as my trainer for the ntire period of my trainin	above
Rakesh Kuling Amrithmed (Name of Trainer) (Name of St. Him/her training facilities in my orga	udent)	nee and I agree to give	kaug ne may
2. Working knowledge of keeping of re 2. Practical Experience in, a) Sample collection, processing and b) Precautions to be taken in clinical c) Hematological analysis. d) Biochemical analysis of various same) Microbiological analysis of samples	preservation. laboratory	il laboratory.	
I also agree that a trained technologis I certify that Amril breef. Kaux.	Section IV E	(Apprentice Master) (Appre	TSED
I certify that Ambiguet Caupractical training as per ordinances fr	Section V EI	Hern Kanne SHU COMPUTER	Sidul ISED
Date 4:3:2024	Jul		

HOD Vander B Voc (MLMDT)

Principal
S.D.College, Barnal

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGI

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	BARNEA

	On Maria
SECTION I	· Al of an College But MIA
This form has been issued to Mr./Ms. YUVA	y stryces.b. com
Regd.No. 114-2021-83 Son of /daughter of Sh.	Talsem Singly
residing at Bachala State	Punjas 0
This form has been issued to Mr./Ms. Regd.No. 114-2021-83 Son of /daughter of Sh. residing at Barnala State Who has produced evidence before me that He/She Training as per ordinances framed by Punjabi Universit New Delhi.	is entitled to receive the Practical ty, Patiala, under the rules from UGC
Date 2:1:2014 Vander	
Nodal Officer	Principal
B Voc (MLMDT)	S.D.College, Barnala
Section/II	S.D. College, BARN
I YOUR J. SINGH JANDW accept Stor Pal	a dauta com.
(Name of Student) (Name of Trainer)	
training and agree to obey and respect him/her during	
	J CMA
	Stanfard
Section III	Stedent
I Shir Pal accept Yours Singt Shirt MAD Was	
(Name of Trainer) (Name of Student)	a trainee and I agree to give
Him/her training facilities in my organization so that	during his/her training he/she may
acquire:-	
1. Working knowledge of keeping of records related to	clinical laboratory.
2. Practical Experience in,	annual raportator y
Sample collection, processing and preservation.	
 b) Precautions to be taken in clinical laboratory c) Hematological analysis. 	
d) Biochemical analysis of various samples.	The second second second
e) Microbiological analysis of samples.	Political Political
	ed for his ther guide stanti Hall Gate
I also agree that a trained technologist shall be assign	ed for his/her guidence.
The Control of the Co	5000 NO. 2- A-48-01 (
	(Apprentice Master)
	Name and address of Institution
Section IV	400
I certify that YWAS SINGH ANDO has spread over 2 months in accordance with deta	is undergone 300 hours training
apread overgr	Compatible
	Jan Washing Sharing
Section V	Head of the Training Institution
V cat A B .	SPERMAL
I certify that	completed in all respect his/her i University, Patiala, under the rules
Date 4.3.2024 Nanda	
Nodal Officer	Principal 6
B Voc (MLMDT)	S.D.College, Barnala

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIST

	(9)6
SECTION 1	S.D. Coll.
This form has been issued to Mr./Ms.	prest Kan Conege, BARNALA
This form has been issued to Mr./Ms. SECTION I Regd.No. 114-2021-807 Son of /daughter of S	Man meet Singt
Who has produced evidence before me that He/Sh Training as per ordinances framed by Punjabi Univers New Delhi.	unjas
Date. 22.01-24 HOD	
B Voc (MLMDT)	Principal S. D. Caller
	S.D.College, Barnala
I. ANSAPPROOF KOUST accept Dr. Chim Acquit (Name of Student) (Name of Affine) (Name of the Hospital / Labor training and agree to obey and respect him/her during	
training and agree to obey and respect him/her during	the entire period of my training.
	postpost kaun
(Name of Trainer) (Name of Student) Him/her training facilities in my organization so that	
Working knowledge of keeping of records related to Practical Experience in, Sample collection, processing and preservation. Precautions to be taken in clinical laboratory Hematological analysis.	clinical laboratory.
Biochemical analysis of various samples. Microbiological analysis of samples.	
I also agree that a trained technologist shall be assign	ed for his/her guidance.
	(Apprentice Master)
	Name and address of Institution
Section IV	Barri
I certify that ANDONES HOUN has spread over S months in accordance with deta	ils enumerated in section TTT
	officer .
NAME OF THE PARTY	Head of the Training Institution and Barnal
0 Section V	Senior Hospita
I certify that	Head of the Training Institution it all Barmals Senior Hospital Barmals completed in all respect his/her i University, Patiala, under the rules

Principal

Date...94:03:24

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIST



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	SECTION T		S.D. Calles	
This form has been issued to Mr./Ms	Jaips	atap s	ing Vix	MANUAL A
This form has been issued to Mr./Ms Regd.NoSon of	/daughter of Sh.	sewa	sinch	
who has produced evidence before	_StatePi	n/a6	U	
New Delhi.	Punjabi Universit	y, Patiala, uni	receive the Pra der the rules from	ctical uGC
Date. \$2:91:24 HO			Delasters	- ~
B Voc (MLI	MDT)		Principal S.D.College, Barr	ala tra
T. 110 A.	Section II	1	8 D C-11-	Principa e, BARNALA
1. Jaipartal Single Vistaccept DA.	Sibha Aggati	who Civil		
training and agree to obey and respect	semilar / Laborer	ne entire peri	od of my training.	the same of
			Taipartal S	Eppl Wick
. 1	Section III		Student	0
I. D. Sibly Appliacept Jailant of Stuffen (Name of Training facilities in my organ acquire:-	Singh Wilkas a dent) nization so that o	trainee and I	agree to give	may
Working knowledge of keeping of rec Practical Experience in,		linical laborati	ory.	
 a) Sample collection, processing and p b) Precautions to be taken in clinical l 	preservation.			
c) Hematological analysis.				10
 d) Biochemical analysis of various san e) Microbiological analysis of samples 	nples			
I also agree that a trained technologist	shall be assigned	d for his/her o	uidance.	
		1		
		- Marcal Of	ncer natice Master)	
	Section IV	Marnala d	address of Institu	ition
I certify that Jack Singh spread over months in accord	Visk no	undergone A	300 hours train	ning
		A		×
	/ <u>2</u>	Head of the T	Fraining Institution	Real Officer
Monard Life Car	Section V	CIVII HOSE	- giot Me	Spital Barris
I certify that Jalparta Sing practical training as per ordinances fra from UGC New Delhi.	med by Punjabi	completed in University, Pa	Senior No Senior No all respectibles, tiala, under the r	/her ules

Principal

Date 94:03:24

HOD B Voc (MLMDT)

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIST

SECTION I	200
This form has been issued to Mr./Ms. Tagd116	Singh S.D. College SARNA
Regd.No. 114-2021 - 986 Son of /daughter of Sh	. Davinder sinela
residing at Dhanalda State Pu	niab
Who has produced evidence before me that He/Shi Training as per ordinances framed by Punjabi Univers New Delhi.	e is entitled to receive the Practical
Date .03.11.3.9 HOD B Voc (MLMDT)	Principal S.D.College, Barnala
Section II	S.D. College Princ
Section II I Jande P Singh accept Rakes K. Jan (Name of Student) (Name of Trainer (Name of the Hospital / Labor	of fisher competerized 205 atory) as my trainer for the above
training and agree to obey and respect him/her during	the entire period of my training.
	Student
Section III	
(Name of Training facilities in my organization so that acquire:-	
Working knowledge of keeping of records related to	clinical laboratory.
Practical Experience in, Sample collection, processing and preservation. Precautions to be taken in clinical laboratory Hematological analysis.	
d) Biochemical analysis of various samples. e) Microbiological analysis of samples.	
I also agree that a trained technologist shall be assign	ned for his/her guidance.
	Rakera Kama Judal (Apprentice Master)
Section IV	EISHU COMPUTERTSED
I certify that Jagdeeh 5: hah h	
spread overmonths in accordance with deta	Rakesh Kama Sarolal
	EISHOOCOMPOTERTSEEO
I certify that Jagach Singh has practical training as per ordinances framed by Punja	s completed in all respect his/her
Date 0 9 03 34	
Date 0 9/03/94 HOD Vander	Principal

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIST



Principal S.D.College, Barnale

			-00
	SECTION I	0	Princ
This form has been issued to Mr./Ms	Dildeep	bengh	S.D. College, BARN
Regd.No. 114-2021-1019 son of	/daughter of Sh	Amond	och sough
who has produced evidence before in Training as per ordinances framed by New Delhi.	_State	is entitled to	receive the Practical
Date 2:1:24	alu-/		Balantani
B Voc (ML	MDT)		Principal S.D.College, Barnala
	Section II		4
1 Dilolelp Singhoccopt Rs	section II	1.1.	S.D. College, BAR
(Name of Stedent) (Name of the Hotraining and agree to obey and respect	(Name of Trainer) ospital / Labora	ntory) as my	trainer for the above
	Section III		/ Student /
(Name of Trainer) (Name of St. Him/her training facilities in my organ acquire: 1. Working knowledge of keeping of red 2. Practical Experience in, a) Sample collection, processing and polyper processing analysis of various same polyper processing analysis of samples processing analysis of	ords related to oreservation. aboratory	during his/he	r training he/she may
I also agree that a trained technologist	shall be assigned	ed for his/her	guidance.
I certify that Dildub sing		Name and	310. hours training
I certify that Dildelb Six	Section V	Head of the	Training Institution
practical training as per ordinances fra	med by Punjabi	University, Pa	itiala, under the rules
Date			Principal Q

B Voc (MLMDT)

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIST



		S.D. College, HARRAL
This form beat have	SECTION I	- 11-
This form has been issue	ed to Mr./Ms. Cantanecci	p Shainie
Regd.No. 114 - 2020	ed to Mr./Ms. Ramandle -850 Son of /daughter of Sh. Asi	hok Kumas Sharma
residing at Barna	la state Punia	4
Who has produced evic Training as per ordinand New Delhi.	dence before me that He/She is ent ces framed by Punjabi University, Pati	itled to receive the Practical ala, under the rules from UGC
Date 02:01:24	Vander	
Date	HOD B Voc (MLMDT)	Principal S.D.College, Barrets
	Section II	S.D. Con- Principal
(Na	2. accept Guilphelt Lingh of J (Name of Trainer) ame of the Hospital / Laboratory) a ey and respect him/her during the ent	as my trainer for the above
		Owner
		Student
	Section III ppt Romandeep Sharmaas a traine	
1. Working knowledge o 2. Practical Experience is a) Sample collection, p b) Precautions to be ta c) Hematological analy d) Biochemical analysis e) Microbiological analy	rocessing and preservation. ken in clinical laboratory sis. s of various samples. ysis of samples.	laboratory.
I also agree that a train	ed technologist shall be assigned for h	is/her guidance fur haved Smill
	1200	(Apprentice Master) me and address of Prestriction asside (Vr. Parter Nursing Hone.
I certify that. RAMA	and REb	rgone .360Bamais 148101 (Pb.) nerated in section III (mapsed Si
	Section V Head	Life Care Laboratory of the Training Testitude Singh B.Sc. MET (PTU)
I certify that RAM practical training as per from UGC New Delhi.	andeeh Shanna has comple ordinances framed by Punjabi Univer	eted in ide Ur. Partap Nursing Hon.e.

HOD Vand

Date ... 04.63.24

Principal

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIST



Principal S.D.College, Barnala

			6
	SECTION I		Q.C.
This form has been issued to Mr./Ms	Resham	Sengh	Principa
Regd.No. 114-2018-975 Son of	/daughter of Sh.	kala s	D. College, BARNAL
residing at Dhahnula.	- 17		0
Who has produced evidence before r	ne that He/She	is entitled to	receive the Practical
Training as per ordinances framed by New Delhi.	Punjabi Universit	y, Patiala, und	er the rules from UGC
Date 2/1/24 Hor	uln		
B Voc (MLI			Principal S.D.College, Barnala
	Section II		₩.
I Resham Sighaccept W. Idhame of student) Iname of the Ho	ian Kuma.	Inlike	S.D. College, BA
Name of Student) /	(Name of Trainer)	of	Lamputcused
LALENTA NAME of the Ho	spital / Laborat	tory) as my to	rainer for the above
training and agree to obey and respect	nim/ner during t	ne entire perio	d of my training.
			Reshamsinge
	Section III		Student
, Vijay Kumaraccept Real	ham Sieh.	traines and T	anne de alor
(Name of Trainer) (Name of Stu	ident) (/		
Him/her training facilities in my organ acquire:-	nization so that o	during his/her	training he/she may
1 Working knowledge of knowless of second			
 Working knowledge of keeping of red Practical Experience in, 		linical laborato	ry.
 a) Sample collection, processing and p b) Precautions to be taken in clinical l 	reservation.		
c) Hematological analysis.			
 d) Biochemical analysis of various san e) Microbiological analysis of samples 	iples.		
I also agree that a trained technologist	shall be assigne	d for his/her a	uldance
		P	tingla
		(Appre	ntice Master)
	Section IV		address of Institution
I cortify that Resham Sin	The state of the s	10.000	Control of the Contro
I certify that	Sen Western and The S	undergone	hours training
	rance with details	enumerateun	Day Do
		Head of the	raining Institution
0.	Section V	The second secon	mputerised Laboratory
I certify that Kesham Sing	C has		all respect his wer
practical training as per ordinances (ra from UGC New Delhi.	med by Punjabi	University, Pat	iala, under the P600
Date. 4/3/24.	1/		
Date 4/2/24 HOD VIM	1-1		Managed - 0
1100	ENTRY		Principal O

B Voc (MLMDT)

PRACTICAL TRAINING CONTRACT FORM FOR MEDICAL LAB TECHNOLOGIST

		SECTION I		S.D. College	
	This form has been issued to Mr./Ms	Elst	III_	1251 224 234	See 14
	Regd.NoSD (B)2006-21 Son of residing at Barnels Who has produced evidence before	/daughter of	sh. Rakesh	Kumae	
	residing at Balnale	State	Pharak		
	Who has produced evidence before a Training as per ordinances framed by New Delhi.				d C
	Date 92.61.14 HO B Voc (ML)	D MDT)		Principal S.D.College, Barnal	Ch
	w and the second	Section II		P	rinch
	I. Eishy accept Resk (Name of Student) (Name of the Hotraining and agree to obey and respect	nenital / Lab	ier)		
				Student	
	(Name of Trainer) (Name of Str Him/her training facilities in my organ acquire:-	Section III huudent) nization so th	as a trainee and I at during his/he	agree to give	
	Working knowledge of keeping of red Practical Experience in, Sample collection, processing and p Precautions to be taken in clinical I. Hematological analysis. Biochemical analysis of various same) Microbiological analysis of samples.	preservation. aboratory	to clinical laborat	ory.	
	I also agree that a trained technologist	shall be assig	-	~7	10
	I certify that	Section IV	EISHU C	entice Master) address of Institution COMPUTERTSEL)
	spread overmonths in accord	fance with de	has undergone? tails enumerated Ralkers		al.
		Section V	Head of the EISHU CO		
	I certify that	med by Punja	LAB	ORATORY	
1	Date 041.03:24	la V			
	HOD B Voc (MLM	DT)		Principal S.D.College, Barnala	5/

This is to certify that below mentioned students of Class B.Voc.(Software Development) of S.D. College Barnala have completed their 2 weeks industrial training at Rival Solutions, Barnala from 1. July 2023 to 189 July 2023 and acquired practical training on developing websites of RENTAURANT, REAL ESTATE using PHP language.

	Name of Trainer
222306(10)29	Akasdaen
2223060030	Lovepreet Singh
2223050031	Swayampreet Singh
	Navjet Singh
2223060033	Lovepreel Singh
2223060035	Jashandeep Singh
2223060038	Rajwinder Singh
7223090037	Gurnaranpreet Singh
2223060038	harpreel Kau
2273090042	Manproof Kaur
2273060044	Aphileet Singh
2223060046	Anmolpreet Singh
7223080048	Manjinder Kaur
2723060049	Harmandeep Singh
2023080050	Hanwindo: Singh
2223060051	Shubbreen Kaur
2023060052	Pushpinder Kaur
2223080053	Ishumika Gayal
The same of the sa	Arshdeep Singh
The state of the s	Karan Singh
2223060057	Sukhdeep K aur
	Harpreet Singh
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	Naviol Stigh Sighs
	Manjeot Singh
	Harmandeep Singh
	Nisha Rani
	Khushal Singla Gobindjet Singh
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(Dr. Roma Sharma) W Principal,

SD College Barnafa

Principal S.D. College, BARNALA For Rival Solutions (Mr. Vishal Mittal) Director, partner RIVAL SOLUTIONS, BARNALA

This is to certify that below mentioned students of Class B.Voc.(Software Development) of S.D. College Barnala have completed their 2 weeks industrial training at Infowiz Industry Private Limited, Bathinda from 1st July 2023 to 15th July 2023 and acquired practical training on Networking.

S.No	Roll no.	Name of Trainee	
1.	2223060001	Arshdeep Singh	
2.	2223060002	Babaldeep Singh	
3.	2223060004	Arshdeep Singh	
4.	2223060005	Lovepreet Singh	
5.	2223060006	Sandeep Kaur	
6.	2223060009	Manicderjit Singh	
7.	2223060010	Harpreet Kaur	
8.	2223080011	Karanyeer Singh	
9.	22230B0012	Gurpreet Kaur	
10.	2223060013	Beljinder Singh	
11.	2223060014	Mandaep Singh	
12.	2223060015	Şukhveer Kaur	
13.	2223060016	Parbhjot Singh	
14.	2223060017	Vishal	
15.	2223060019	019 Raj Singh 020 Gagandeep Singh	
16. 2223060020 17. 2223060022			
	2223050072		
18.	2223060023	Arshdeep Kaur Chaha	
19.	2223060024	Lovepreat Singh	
20.	2223060025	Rajdeep Singh	
21.	2223060026	Komal	
22.	2223060027	Hardeep Singh	
23.	2223060028	Keranpreet	

(Dr. Rama Sharma)

S.D. College, Barnela

Principal W

Principal,

SD College Barnala INFOWIZ-A SOFTWARE SOLUTIONS.

(Mr. Surneel Goyal)

Director.

BATHINDA

This is to certify that below mentioned students of class B.Voc.(Software Development) of S.D. College, Barnala have visited Industries Chamber on 31st March 2024

5	No.	Roll No.	Name of Trainee
	1.	230603011	Tanisha
	2.	230603006	Aryan Garg
	3.	230603001	Davinder Mittal
	4.	230603002	Ramanpreet Kaur
3	5.	230603003	Khushpreet Kaur
	6.	230603010	Ruby Devi
	7.	230603004	Ramandeep Kaur
	8.	230603005	Chamandeep Singh Gill
	9.	230603007	Puneet Bansal
	10.	230603008	Sukhpal Singh
	11.	230603009	Tushaar Singla
	12.	230603013	Rajni Rani
	13.	230603014	Sharanjeet Kaur
	14.	230603015	Arshdeep Singh
	15.	230602017	Bhumika Goyal
	16.	230602019	Lovepreet Singh
	17.	230602001	Swayampreet Singh
	18.	230602005	Manjeet Kumar
- 7	19.	230602006	Arshdeep Kaur Chahal
	20.	230602007	Manjinder Kaur
	21.	230602022	Harmandeep Singh
	22.	230602020	Komal
- 3	23.	230602015	Armanjeet Singh
3	24.	230602013	Harpreet Singh
- 1	25.	230602009	Harpreet Kaur
3	26.	230602002	Pushpinder Kaur
	27.	230602026	Harpreet Kaur

(Dr. Rama Sharma) W

S.D. College Barnala

S.D. College, BARNALA

(Mr. Vijay Garg)

Chairman, Industries Chamber

Distt. BARNALA

S.No.	Name of Trainee	Class and Roll No. BrocomTI 2006		Time Period
	Arshdeep paux			
2	Panyia	V	2007	11
3	Examples sinh	()	2016	U
4	manyit singh	IJ	201]	1/
2	Reyinder Cram	11	2019	1
6	Asmanyot Sluch	11	2009	11
7	Leichwinder Raue	11	20 10	1)
8	Beant unh.	1,	2016	1/
9,		1/	2013	1,
10	Jaskarankeret singh.	1/	2015	1,
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For Shaheed-e- Azam Press & Hospitality Pvt. Ltd.

Editor/Publisher

Auth. Signature

SD College, Bappalacipal S.D. College, BARNALA

Barnala visited College training practical

S.No.	Name of Trainee	Class and Roll No.	Time Period
)	Janyia	Browntilled, 2008	11 April to27 April
2	Jashaval lingh	Brown The 2006	11 April to 27 Aprils
3	Marinder Sinch	BrownTug 200 \$	11 April to 27 April
4	markeret Kary	BrocomTug2003	11 About to 27 April>
2.	Himanshu	BrownThy 2005	11 About to 27 April 21
6	Lathwinder kam	BrownTud 2010	11 Abrul to 27 April 2
7	Kulderpeinen	BYOWM Ded 2014	11April to 27 April
8	Jaswinder Angh	BrocomTInd 2013	11 April 1027 Ap. 24
9	Harmanvees singh	Browning 2017	11 April to27 Ap2
10.	Kryshan Kant.	Brown Trol 2010	11April tos7Ap
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Auth. Signature

Barnala visited College This is to certify that below mentioned students SD Taret Bharti Parkashan training practical acquired 18 November 2023 to 5 December 2023.

S.No.	Name of Trainee	Class and Roll No.	Time Period
1.	And de a kan	Brown Bud 2006	18 NOV-2023 to SDE20
2.	Arshdeep Kam	Brown The 20%	18 Nov. 2013 to 5 Dec 2013
	Tanyla	The state of the s	18 NOV-2023 to Spece
3.	Chandlep Singh	Brocomi The 2016	18Nov.2023 to5Dec 2023
٧,	mayit Singh	1) Brownilly 201)	18 NOV 2022/0 5 DUC202
5.	Reginder Faux	8voc smr 2019	18 NOV. 2023 to 5DU20
6	Armayot Singh	Brocompted 2009	18 Nov. 2023 to SDec 202
	lethwinder keine	Brown Tug 2010	1 1 1000 2 1 the Chee 2021
8	Beaut Sigh	BrocomTTId20 6.	box 1 1202 2 to (Del 202)
. 4	Jas Karansenet ligh		10.1 2 to Chearn
10.	Halopy Kam	BYO WMT Ind 2015	181404505
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		N. Carlotte	
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Editor/Publisher

TARK BHARTI PARKASHAN

Purani Sabji Mandi.
Opp St No 8, K C Road,
Barnala-148101 (Pb.) India
Ph. 01679-241744, 75288-62854
78377-18723, 90411-63894

SD College, Barnala S.D. College, BARNALA