

October-2018

# TEACHER'S ATTENDANCE REGISTER

SCHOOL/COLLEGE Opticalmology

Sl. No.	Name of the Teacher	Designation	Date 1		2		3		4		5		6		7		8		9	
			Time	Signature	Time	Signature	Time	Signature	Time	Signature	Time	Signature	Time	Signature	Time	Signature	Time	Signature	Time	Signature
1-	Dr. H.P.S. Maliya	Prof. Head																		
2-	Dr. V.K. Maliya	Prof.																		
3-	Dr. Kirti Jain	Prof.																		
4-	Dr. Sanjiv Kumar	Prof.																		
5-	Dr. Chakra Jain	Asst. Prof.																		
6-	Dr. Sanjay Sharma	AP																		
7-	Dr. Anveshi Lochan	AP																		
8-	Dr. Shwanti Mahajan	SR																		

*Carroll*



*Chandra*



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[illegible]

8-30 AM



# TEACHER'S ATTENDANCE REGISTER

FOR THE MONTH OF

SL. No.	Date	18	19	20	21	22	23	24	25	26	27	28	29
1-						<del>Holiday</del>							
2-						<del>Holiday</del>							
3-													
4-													
5-													
6-													
7-													
8-													

Compensatory leave 1/8/16 2/10/16

PRINCIPAL S.M.C.



FOR THE MONTH OF October-2016

[illegible]



OCT-2016

TEACHER'S ATTENDANCE REGISTER

SCHOOL/COLLEGE

Ophthalmology

Name of the Teacher	Designation	1 Date		2		3		4		5		6		7		8		9	
		Time	Signature	Time	Signature	Time	Signature	Time	Signature	Time	Signature	Time	Signature	Time	Signature	Time	Signature	Time	Signature
Dr. Shayana		8		8		8		8		8		8		8		8			
Dr. Rahil		R		R		R		R		R		R		R		R			
Dr. Manan Kaushik																			
Dr. Anurag Malik		AM		AM		AM		AM		AM		AM		AM		AM			
Dr. Akansha Tripathi		AM		AM		AM		AM		AM		AM		AM		AM			
Dr. Raghav Malik		CL		CL		CL		CL											
Dr. Richa Rai		Richa		Richa		Richa		Richa		Richa		Richa		Richa		Richa		Richa	
Dr. Shreya Khanna		B		B		B		B		B		B		B		B		B	
Dr. Akshita Hosija																			
Dr. Aastha Gumber		Aumber		Aumber		Aumber		Aumber		Aumber		Aumber		Aumber		Aumber		Aumber	
Dr. Gargi Agarwal		Gargi		Gargi		Gargi		Gargi		Gargi		Gargi		Gargi		Gargi		Gargi	
Dr. Rohan Bawry		R		R		R		R		R		R		R		R		R	





FOR THE MONTH OF October-2016

[illegible]

month	Total Leaves upto this month					Particulars
month	Total	Casual	Medical	Earned	Honorary	Sign. of the Teacher/ Staff
	CL (3)					
	(1)					
	(1)					
	AL (2)					
01/15-26, 14/5/10/15 AL	(4)					(2)
10/10, 14/10/15-26						(2)
	(1)					
	(1)					
15-26	(4)					
	(1)					



Oct-2016

TEACHER'S ATTENDANCE

TEACHER'S ATTENDANCE REGISTER

OPhtalmology

SL. No.	Name of the Teacher	Designation
1-	Dr. Shayana	
2-	Dr. Rohil	
3-	Dr. Manan / Kaushik	
4-	Dr. Anurag Malikar	
5-	Dr. Akansha Tewari	
6-	Dr. Raghav Malik	
7-	Dr. Richa Rai	
8-	Dr. Shreya Khanna	
9-	Dr. Aakriti Hasija	
10-	Dr. Aastha Gumber	
11-	Dr. Changi Agarwal	
12-	Dr. Rohan Bowry	



	Date	18	19	20	21	22	23	24	25	
SL. No.	Time	Signature	Time	Signature	Time	Signature	Time	Signature	Time	Signature
1-										
2-		R	R	L	f	cl		n	P	
3-										
4-		AM	AM	AM	AM	AM		AM	AM	
5-		AM	AM	AM	AM	AM		AM	AM	
6-		P	P	P	P	P		P	P	
7-		P	P	P	P	P		P	P	
8-		P	P	P	P	P		P	P	
9-		P	P	P	P	P		P	P	
10-		P	P	P	P	P		P	P	
11-		P	P	P	P	P		P	P	
12-		P	P	P	P	P		P	P	

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6	27	28	29	30	31	Leaves of this month					Leaves upto Last month					Total Leaves upto this month					Particulars		
Signature	Time	Signature	Time	Signature	Time	Casual	Medical	Earned	Honorary	Total	Casual	Medical	Earned	Honorary	Total	Casual	Medical	Earned	Honorary	Total	Att. for this month	Sign. of the Teacher/ Staff	
[Signature]	[Signature]	[Signature]	CL	[Signature]	CL						13, 27, 31/10/16					CL							
[Signature]	[Signature]	[Signature]	[Signature]	[Signature]	[Signature]						22/10/16					CL							
[Signature]	[Signature]	[Signature]	[Signature]	[Signature]	[Signature]						NCL												
[Signature]	AM	AM	AM	[Signature]	CL						31/10/16					CL							
[Signature]	[Signature]	[Signature]	[Signature]	[Signature]	CL						14/15/10/15					CL							
[Signature]	[Signature]	[Signature]	[Signature]	[Signature]	[Signature]						1, 3, 4, 5/10/16					CL							
[Signature]	[Signature]	[Signature]	[Signature]	[Signature]	[Signature]						14/10, 15/10/16					CL							
[Signature]	[Signature]	[Signature]	[Signature]	[Signature]	[Signature]						14/15/10/16					CL							
[Signature]	[Signature]	[Signature]	[Signature]	[Signature]	[Signature]						31/10/16					CL							
[Signature]	[Signature]	[Signature]	[Signature]	[Signature]	[Signature]						31/10/16					CL							
[Signature]	[Signature]	[Signature]	[Signature]	[Signature]	[Signature]						12, 13, 14, 15/10/16					CL							
[Signature]	[Signature]	[Signature]	[Signature]	[Signature]	[Signature]						8/10/16					CL							

Principal S.M.C.

Principal

PRINCIPAL  
S.M.C.