**Annex—A**

**Monthly Test—Result Statement**

For the Month of January, 2019 .

Name of Institute: District:

Name of Trade:

Trade Level: G-II / G-III / 6-months. Shift : Morning / Evening

Start of Class: DD—MM—YYYY Examination Month & Year:

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| Sr. No. | TTB Reg. No. | Name of Trainee | Father’s Name | CNIC/B.Form | Attendance during month %age | Marks obtained in Monthly Test | Result |
| %age Theory | %age Practical |
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Name of Instructor: Signature: