

ITI Name:-.....

Shift:- Unit:-.....

Trade..... Week no

Date From..... to

Days	Weekly Programs				Particulars Exercise / Job -.....	Quality of work
	Practical	Demostration	Subject	Progress		
Monday					Sketch :-	
Tuesday						Method of work
Wednesday						
Thursday					Raw Material required:-	Time Alloted
Friday						Deduction of Marks
Saturday						Tolarance + Time Hr

Instructor

Group Instructor

Principal / Superintendent

ITI Name:-.....

JOB EVALUATION SHEET

Trade:- Week No:- Date:- From.....To.....

Sr. No.	Name	Quality of Work						Method of work				Time	Grand	Remarks
		10	10	10	10	10	Total (50)	10	10	10	Total (30)	Total (20)	Total (100)	
1														
2														
3														
4														
5														
6														
7														
8														
9														
10														
11														
12														
13														
14														
15														
16														
17														
18														
19														
20														
21														
22														
23														
24														

Instructor

Group Instructor

Principal / Superintendent