**INTERNSHIP PROGRAMME**

# B.A/ B.Com 5th Semester, 2025

# Department of ………………………………, Pramathesh Barua College

# Gauripur

**Name of the Student:**

**G.U Roll No:**

**Registration Number:**

**Name of Supervisor:**

**Name and Address of the IPO: RESHMI MAKE UP STUDIO AND ACADEMY**

**Name: RESHMI MAKE UP STUDIO AND ACADEMY, GAURIPUR**

**Address: GAURIPUR**

**Attendance Sheet**

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| **Sl No.** | **Date** | **Time In** | **Time Out** | **Total Hours** | **Signature of Supervisor** |
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**Students’ Signature**