



**KERALA UNIVERSITY OF HEALTH SCIENCES
THRISSUR – 680 596
Phase I MBBS CBME**

LOG BOOK
Department of

Name of the College:

College emblem

Name of the Student:

Roll No:

University Registration No:

(as per GMR 2019)

Document 2019/40836/1 - GENERAL - File No. 2018/9552/1
Approved by Regr on 05/12/2019 07:40:20

<http://www.kuhs.ac.in>
KDWeF-zSH-ocjFH-cZcI



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Certificate

This is to certify that Mr./Ms.....
has undergone one year training inand his /her
performance after assessment of various competencies and other
criteria is found to be satisfactory/good/excellent.

Head of the Department

Department of

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ACADEMIC PERFORMANCE

Monitoring and Feedback- Internal Assessment

Sl.	Internal	Marks	Feedback provided	Date	Signatur	Signatur
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No.	Examination	obtained	Positive points	Points that could be improved		e of student	e of Faculty
1	Theory Practical Formative Assessment						
2	Theory Practical Formative Assessment						
3	Theory Practical Formative Assessment						
4	Theory Practical						



	Formative Assessment						
5	Theory Practical Formative Assessment						
6	Theory Practical Formative Assessment						

COMPETENCY ASSESSMENT

DATE	COMPETENCY	REMARKS	SIGNATURE



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