

THE TAMIL NADU Dr. M.G.R. MEDICAL UNIVERSITY
69, ANNA SALAI, GUINDY, CHENNAI- 600 032.

ATTENDANCE SHEET

Month & Year of Exam : MAR 2023

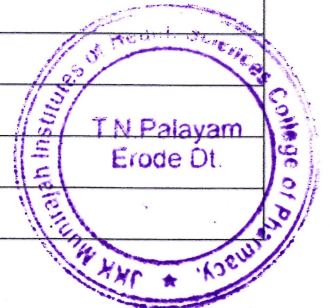
Course : 56.B.Pharm. FIRST SEMESTER

Exam Center : 649.JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES, COLLEGE OF PHARMACY, ERODE

Subject / Paper : 562007 - PHARMACEUTICAL INORGANIC CHEMISTRY - (T)

Date & Session of Exam : 15-09-2023 F

S.No	Register No.	Name of the Student	Signature of the Student
1	560021516548	MADHESH G	— ABSENT —
2	560021516555	MOHANRAJ G	— ABSENT —
3	560021516574	SANJEEVI T	T. Sanjeevi
4	560021516575	SARANYA G	Saranya G.
5	560021516585	SIVAPRAKASH M	Sivaprakash M.
6	560021516589	SWETHA S	Swetha S.
7	560021516594	VALLARASU M	Vallarasu M.
8	560021516596	VASANTH R	Vasanth R.
9	560022516501	ABDUL RAHIM K	Abdul Rahim K.
10	560022516502	ABINAYA M	Abinaya M.
11	560022516503	AGALYA A	A. Agalya.
12	560022516504	AHAMED SHAMEEM M	Ahamed Shameem M.
13	560022516505	AJASH MITHEEN A	Ajash Mitheen A.
14	560022516506	ANISH ROJA K	Anish Roja K.
15	560022516507	ARAVINTH K	Aravinth K.
16	560022516508	ARAVINTH P	Aravinth P.
17	560022516509	ARUN M	Arun M.
18	560022516510	ARUNIMA R KUMAR	Arunima R Kumar.
19	560022516511	AYYANAR M	Ayyanar M.
20	560022516512	BHARANI M	Bharani M.



(Signature)
15/9/23
K. KANAGIAPPA
Signature of the Invigilator

(Signature)
15/09/23 (S. KANNAN)
Signature of the Chief Superintendent

NOTE :

- Candidates who are NOT present may be noted as absent against their register nos.
- Separate format may be used by each invigilator.

(Signature)
Principal

JKK Munirajah Institute of Health Sciences
College of Pharmacy, T.N. Palayam
Gobi (Tk), Erode (Dt) - 638 505

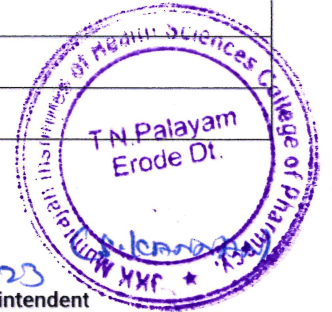
CHIEF SUPERINTENDENT
UNIVERSITY EXAMINATIONS
COLLEGE CODE No : 649
JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES
COLLEGE OF PHARMACY, T.N. PALAYAM,
GOBI (TK), ERODE (DT) - 638 505

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Course : 56.B.Pharm. FIRST SEMESTER
 Exam Center : 649.JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES, COLLEGE OF PHARMACY, ERODE
 Subject / Paper : 562007 - PHARMACEUTICAL INORGANIC CHEMISTRY - (T)
 Date & Session of Exam : 15-09-2023 F
 Month & Year of Exam : MAR 2023

S.No	Register No.	Name of the Student	Signature of the Student
21	560022516513	BIRUNDHA E	E. Birundha
22	560022516514	BOOBALAN S	S. Boobalan
23	560022516515	BOOMIKA E	E. Boomika
24	560022516516	CHANDRU M	M. Chandru
25	560022516517	DESIKA K	K. Desika
26	560022516518	DHANUSH D	D. Dhannush
27	560022516519	DHANUSHKUMAR K	K. Dhannush Kumar
28	560022516520	DHARUN M	M. Dhannush
29	560022516521	DINESH S	S. Dinesh
30	560022516522	ELAMPARITHI T	T. Elamparithi
31	560022516523	ESAKKI SARAVANAN K	K. Esakki Saravanan
32	560022516524	EZHILARASAN R	R. Ezhilarsan
33	560022516525	GANESHKUMAR K	K. Ganesh Kumar
34	560022516526	GNANAPRIYA K	K. Gnanapriya
35	560022516527	GOKUL A	A. Gokul
36	560022516528	GOKULNATH S	S. Gokulnath
37	560022516529	GOWTHAM B	B. Gowtham
38	560022516530	HARSHINI S	S. Harshini
39	560022516531	INDHUMATHI C	C. Indhumathi
40	560022516532	JEEVA C	C. Jeeva



M. Nitaya (M. NITAYA)
15/09/23

Signature of the Invigilator

(Signature)
15/09/23
Signature of the Chief Superintendent

NOTE :

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(Signature)

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 JKK Munirajah Institute of Health Sciences:
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Course : 56.B.Pharm. FIRST SEMESTER

Exam Center : 649.JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES, COLLEGE OF PHARMACY, ERODE

Subject / Paper : 562007 - PHARMACEUTICAL INORGANIC CHEMISTRY - (T)

Date & Session of Exam : 15-09-2023 F

S.No	Register No.	Name of the Student	Signature of the Student
41	560022516533	JEGAN J	J.S
42	560022516535	JOTHIKA S	J. Jothika
43	560022516536	KANISHKAR P R	P.R. Kanishkar
44	560022516537	KARTHICK S	S.Karthick
45	560022516538	LINGESHWARAN S	S. Lingeshwaran
46	560022516539	MADHAN R	R. Madhan
47	560022516540	MAGESH S	S. Magesh
48	560022516541	MANIKANDAN I	I. Manikandan
49	560022516542	MANMADHAN K	K. Manmadhan
50	560022516543	MANO M	Mano M
51	560022516544	MANOJ S	S. Manoj
52	560022516545	MANOJKUMAR A	A. Manojkumar
53	560022516546	MARUDHAMUTHU M	M. Marudhamuthu
54	560022516547	MATHIYARASU A	A. Mathiyarasu
55	560022516548	MATHUMITHA M	M. Mathumitha
56	560022516549	MITHUNKUMAR C	C. Mithunkumar
57	560022516551	MOTHISH R R	R.R. Mothish
58	560022516552	MUKESH S D	S.D. Mukesh
59	560022516553	NAVANEETHAN E	E. Navaneethan
60	560022516554	NICKELSON JERNAS N	N. Nickelson

NAVANEETHAKRISHNAN. S
(S. Navaneethan)
15/09/23

Signature of the Invigilator

Signature of the Chief Superintendent

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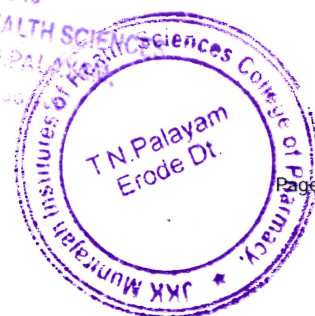
Principal

JKK Munirajah Institute of Health Sciences
College of Pharmacy, T.N.Palayam,
Gobi (Tk), Erode (Dt)

Report Taken by 649R2

Date: 24/8/2023, 9:33:34 am

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JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES
COLLEGE OF PHARMACY, T.N.PALAYAM
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Subject / Paper : 562007 - PHARMACEUTICAL INORGANIC CHEMISTRY - (T)

Date & Session of Exam : 15-09-2023 F

S.No	Register No.	Name of the Student	Signature of the Student
61	560022516555	NIRANJANA S S	<i>N. N. @ g</i>
62	560022516557	PONAJANTHA P	<i>Ponath</i>
63	560022516558	POORNAMIRTHA P	<i>P. Poornimitha</i>
64	560022516559	PRASANTH K	<i>U. Prasanth</i>
65	560022516560	PRAVEEN KUMAR B	<i>B. Praveen</i>
66	560022516561	PRAVEENKUMAR G	<i>— ABSENT —</i>
67	560022516562	PRAVEENKUMAR M	<i>M. Praveen</i>
68	560022516563	PREETHI K	<i>K. Preethi</i>
69	560022516564	RAGUL PRASATH C	<i>C. Ragul Prasath</i>
70	560022516565	REPEKKA I	<i>I. Repokka</i>
71	560022516566	RISHIKESAVAN M	<i>M. Rishi</i>
72	560022516567	RUBIKASRI P	<i>P. Ruby</i>
73	560022516568	SABAPATHI P	<i>P. Sabapathi</i>
74	560022516569	SACHITHA R	<i>R. Sachitha</i>
75	560022516570	SAHANA S	<i>S. Sahana</i>
76	560022516571	SAKILESH M	<i>M. Sakilesh</i>
77	560022516572	SANJAI B	<i>B. Sanjai</i>
78	560022516573	SANTHOSH T	<i>T. Santhosh</i>
79	560022516574	SARAVANAN S	<i>S. Saravanan</i>
80	560022516575	SELVAPRIYA J	<i>J. Selvapriya</i>

1. D.B. (D. BALAJI) 15/9/23

2. J. (G. VINODARAJ C) 15/09/23

Signature of the Invigilator

Signature of the Chief Superintendent

NOTE :

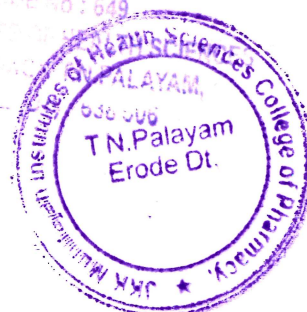
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[Signature]
Principal

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S.No	Register No.	Name of the Student	Signature of the Student
81	560022516576	SHANKARA PRABHU P S	P.S. Shankarap S.
82	560022516577	SIBIRAJ S	S. Sibiraj
83	560022516578	SINDHU A	A. Sindhu
84	560022516579	SIVAKUMAR M	M. Sivakumar
85	560022516580	SIVANANTHAM S	S. Sivanantham
86	560022516581	SIVASRIMATHI M	M. Sivasrimathi
87	560022516582	SUGAN S	S. Sugan
88	560022516583	TANUSHREE S	S. Tanushree
89	560022516584	THIVAGARPRANESH T	T. Thivagarpranesh
90	560022516585	VARUN SINGH M	M. Varun Singh
91	560022516586	VASUKI C	C. Vasuki
92	560022516587	VEDHAPRAKASH D	D. Vedhaprakash
93	560022516588	VENKATESAN R	R. Venkatesan
94	560022516589	VIDHYAVANI N	N. Vidhyavani
95	560022516590	VIGNESHWARAN M	M. Vigneshwaran
96	560022516591	VIJAY N	N. Vijay
97	560022516592	VIJAYADHARSHINI B	B. Vijayadharshini
98	560022516593	VIMAL P	P. Vimal

A. 15/09/23 (Chandrasekhar)

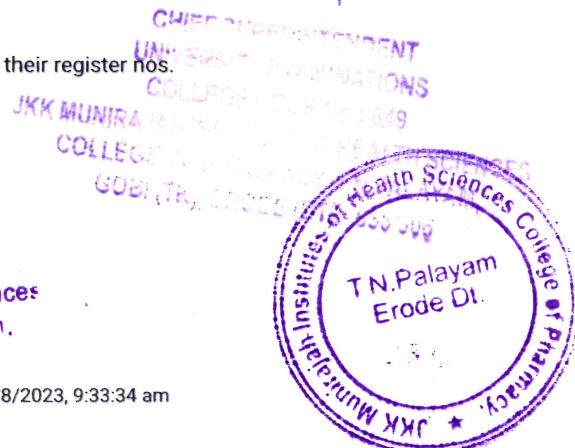
Signature of the Invigilator

A. Suresh
Signature of the Chief Superintendent

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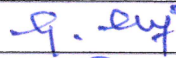
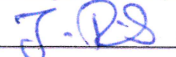
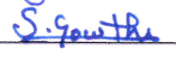
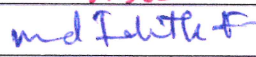


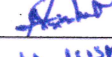
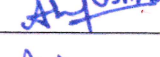
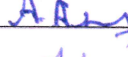

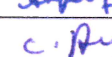
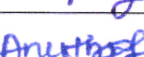
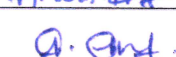
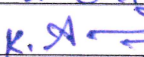
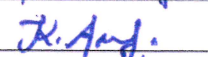
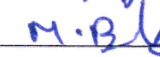





THE TAMIL NADU Dr. M.G.R. MEDICAL UNIVERSITY

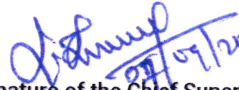
69, ANNA SALAI, GUINDY, CHENNAI- 600 032.

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Course : 56.B.Pharm. SECOND SEMESTER Month & Year of Exam : MAR 2023
 Exam Center : 649.JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES, COLLEGE OF PHARMACY, ERODE
 Subject / Paper : 562020 - PATHOPHYSIOLOGY (T)
 Date & Session of Exam : 07-09-2023 F

S.No	Register No.	Name of the Student	Signature of the Student
1	561894010	GOPI G	
2	561994021	DINESH KUMAR J	
3	561994032	GOWTHAM S	
4	561994041	KARTHICK KUMAR R	— ABSENT —
5	561994052	MOHAMMED FAHATH F	
6	560020516529	JEEVANANTHA R	— ABSENT —
7	560021516501	ABARNA S	
8	560021516502	ABINAYA S	
9	560021516503	ABISHEK R K	
10	560021516504	AHAMED USMAN N	
11	560021516505	AJITHKUMAR A	
12	560021516506	AMBIKA S	
13	560021516507	ANANDHI G R	
14	560021516508	ANBUMANI C	
15	560021516509	ANUTHRA A	
16	560021516510	ARUN A	
17	560021516511	ARUNRAJ K	
18	560021516512	ARUNRAJ K	
19	560021516513	BHARATHKANNAN M	
20	560021516514	CHANDRU A	


 Signature of the Invigilator
 (Dr. C. K. Senthil Kumar)


 Signature of the Chief Superintendent
 (S. Kannan)

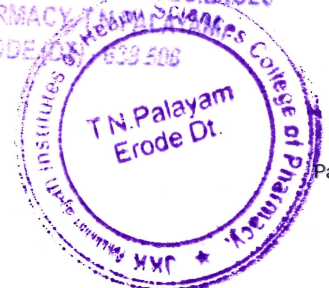
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Exam Center : 649.JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES, COLLEGE OF PHARMACY, ERODE

Subject / Paper : 562020 - PATHOPHYSIOLOGY (T)

Date & Session of Exam : 07-09-2023 F

S.No	Register No.	Name of the Student	Signature of the Student
21	560021516515	CHANDRU K	<i>[Signature]</i>
22	560021516516	CHINNAKANNAN K	<i>[Signature]</i>
23	560021516517	DEEPASELVI T	<i>[Signature]</i>
24	560021516518	DHANASRI K	<i>[Signature]</i>
25	560021516519	DHANUSH S	<i>[Signature]</i>
26	560021516520	DHARANI R S	<i>[Signature]</i>
27	560021516521	DHARUN PRAKASH M	<i>[Signature]</i>
28	560021516522	DINESH K	<i>[Signature]</i>
29	560021516523	FARISH MOHAMED A M	<i>[Signature]</i>
30	560021516524	GOBIKA R	<i>[Signature]</i>
31	560021516525	GOKILA K	<i>[Signature]</i>
32	560021516526	GOKULNATH V	<i>[Signature]</i>
33	560021516527	GOWRI SHANKAR V	<i>[Signature]</i>
34	560021516528	GOWRIMALA I	<i>[Signature]</i>
35	560021516529	GOWTHAM S	<i>[Signature]</i>
36	560021516530	GUGAPRIYA M	<i>[Signature]</i>
37	560021516531	GUNA L	<i>[Signature]</i>
38	560021516532	HARI NIVAS V	<i>[Signature]</i>
39	560021516533	HARINI K	<i>[Signature]</i>
40	560021516534	HEMALATHA V	<i>[Signature]</i>

1. *[Signature]* (DR. K. K. SETHURAJ KUMAR)

2. *[Signature]* (J. PRIYA)

Signature of the Invigilator

[Signature] (S. KANNAN)

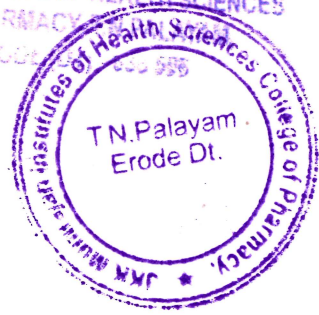
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Course : 56.B.Pharm. SECOND SEMESTER

Month & Year of Exam :

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Exam Center : 649.JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES, COLLEGE OF PHARMACY, ERODE

Subject / Paper : 562020 - PATHOPHYSIOLOGY (T)

Date & Session of Exam : 07-09-2023 F

S.No	Register No.	Name of the Student	Signature of the Student
41	560021516535	HEMARANI S	<i>[Signature]</i>
42	560021516536	INDIRA M	<i>[Signature]</i>
43	560021516537	JAGATHEESAN M	<i>[Signature]</i>
44	560021516538	JAYAPRAKASH J	<i>[Signature]</i>
45	560021516539	JENITHA M	<i>[Signature]</i>
46	560021516540	JOSHUA M	<i>[Signature]</i>
47	560021516541	KARTHICK K	<i>[Signature]</i>
48	560021516543	KAVIMANI S A	<i>[Signature]</i>
49	560021516544	KAVIN S	ABSENT
50	560021516545	KAVYASHREE C S	<i>[Signature]</i>
51	560021516546	KIRUTHIKA G	<i>[Signature]</i>
52	560021516547	KOKILA A	<i>[Signature]</i>
53	560021516548	MADHESH G	ABSENT
54	560021516549	MANOJ J	<i>[Signature]</i>
55	560021516550	MARUDHUPANDIYAN S	<i>[Signature]</i>
56	560021516551	MEHAVARSHINI K	<i>[Signature]</i>
57	560021516552	MELBIN J	<i>[Signature]</i>
58	560021516553	MOHANAPRIYAN K	<i>[Signature]</i>
59	560021516554	MOHANASUNDARAM A	<i>[Signature]</i>
60	560021516555	MOHANRAJ G	ABSENT

1. J. P. (J. PRIYA)
2. Govindaraj.C (Govindaraj.C)

Signature of the Invigilator

Signature of the Chief Superintendent

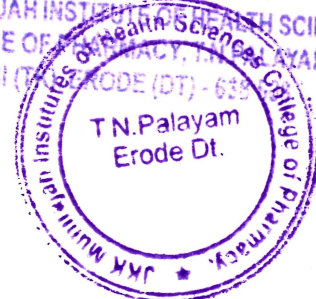
NOTE :

- i. Candidates who are NOT present may be noted as absent against their register nos.
- ii. Separate format may be used by each invigilator.

Principal
JKK Munirajah Institute of Health Sciences
College of Pharmacy, T.N.Palayam,
Gobi (Tk), Erode (Dt) - 638 506

CHIEF SUPERINTENDENT
UNIVERSITY EXAMINATIONS
COLLEGE CODE No : 649

JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES
COLLEGE OF PHARMACY, T.N.PALAYAM,
GOBI (TK), ERODE (DT) - 638 506



THE TAMIL NADU Dr. M.G.R. MEDICAL UNIVERSITY

69, ANNA SALAI, GUINDY, CHENNAI- 600 032.

ATTENDANCE SHEET

Month & Year of Exam :

MAR 2023

Course : 56.B.Pharm. SECOND SEMESTER

Exam Center : 649.JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES, COLLEGE OF PHARMACY, ERODE

Subject / Paper : 562020 - PATHOPHYSIOLOGY (T)

Date & Session of Exam : 07-09-2023 F

S.No	Register No.	Name of the Student	Signature of the Student
61	560021516556	MOHANRAM N	
62	560021516557	MOORTHY M	
63	560021516558	MUNEESWARAN I	
64	560021516559	NAVANEETHAKRISHNAN J	
65	560021516560	NISHA K	
66	560021516561	NITHISHKUMAR R	
67	560021516562	NITHYA KEERTHI R	
68	560021516563	PARASURAMAN T	
69	560021516564	PARTHIPAN M	
70	560021516565	PAVITHRA S	
71	560021516566	PRASANNA S	
72	560021516567	PRATHAP P	
73	560021516568	PRITHIVIRAJ V	
74	560021516569	RAGUL P	
75	560021516570	RAJ KUMAR M	ABSENT
76	560021516571	RAJESHKANNAN R	
77	560021516572	RANJANI V	
78	560021516573	RITHIKADEVI N	
79	560021516574	SANJEEVI T	
80	560021516575	SARANYA G	

1. 07/09/23 (Govindaraj.C)

2. 07/09/2023 (K. Mohanram)

Signature of the Invigilator

Signature of the Chief Superintendent

NOTE :

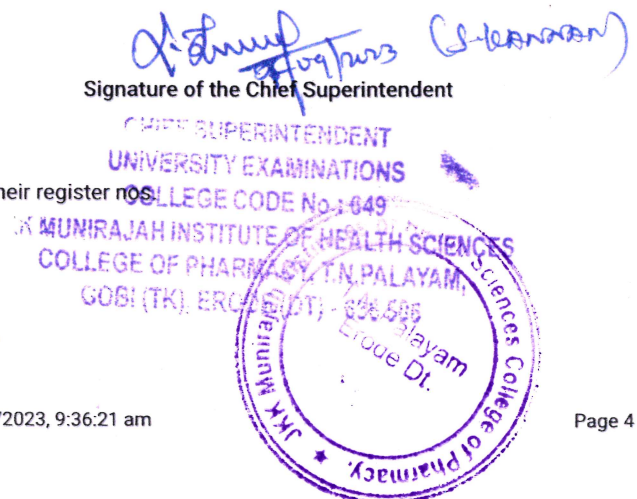
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JKK Munirajah Institute of Health Sciences
College of Pharmacy, T.N.Palayam,
Gobi (Tk), Erode (Dt) 638 505

Report Taken by 649R2

Date & Time: 24/8/2023, 9:36:21 am



THE TAMIL NADU Dr. M.G.R. MEDICAL UNIVERSITY

69, ANNA SALAI, GUINDY, CHENNAI- 600 032.

ATTENDANCE SHEET

Course : 56.B.Pharm. SECOND SEMESTER
 Exam Center : 649.JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES, COLLEGE OF PHARMACY, ERODE
 Subject / Paper : 562020 - PATHOPHYSIOLOGY (T)
 Date & Session of Exam : 07-09-2023 F
 Month & Year of Exam : MAR 2023

S.No	Register No.	Name of the Student	Signature of the Student
81	560021516576	SARVESHWARAN S	S. Sarvesh
82	560021516578	SELVARAJA V	V. Selvaraja
83	560021516579	SELVASURYA K	K. Selvasurya
84	560021516580	SHALINI S	S. Shalini
85	560021516581	SHAVEETHA A	A. Shaveetha
86	560021516582	SHIBI S R	S. Shibi
87	560021516583	SINDHU R	R. Sindhu
88	560021516584	SIRANJIVI D	D. Siranjivi
89	560021516585	SIVAPRAKASH M	M. Sivaprakash
90	560021516586	SNEKA K	K. Sneka
91	560021516587	SOWMIYA SRI S	S. Sowmiya
92	560021516588	SUGANTHAN M	M. Suganthan
93	560021516589	SWETHA S	S. Swetha
94	560021516590	TAMILSELVAN G	G. Tamilselvan
95	560021516591	TAMIZHSELVAN M	— ABSENT —
96	560021516592	THIRISHA T	T. Thirisha
97	560021516593	VAISHNAVI G	G. Vaishnavi
98	560021516594	VALLARASU M	M. Vallarasu
99	560021516595	VARUN K	K. Varun
100	560021516596	VASANTH R	R. Vasanth

[Handwritten Signature]
 (G. Lakshmi)

Signature of the Invigilator

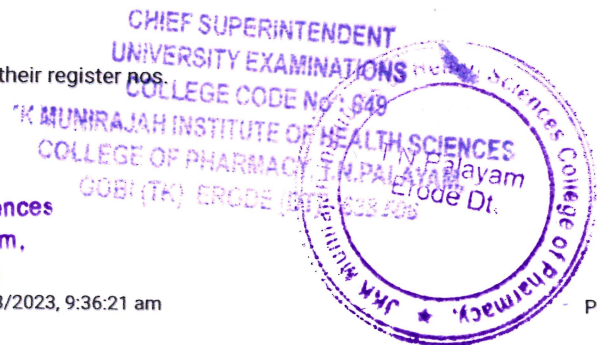
[Handwritten Signature]
 (S. Lakshmi)

Signature of the Chief Superintendent

NOTE :

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[Handwritten Signature]
 Principal
 JKK Munirajah Institute of Health Sciences
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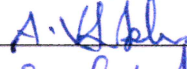
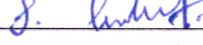


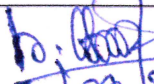
THE TAMIL NADU Dr. M.G.R. MEDICAL UNIVERSITY

69, ANNA SALAI, GUINDY, CHENNAI- 600 032.

ATTENDANCE SHEET

Course : 56.B.Pharm. SECOND SEMESTER
Month & Year of Exam : MAR 2023
Exam Center : 649.JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES, COLLEGE OF PHARMACY, ERODE
Subject / Paper : 562020 - PATHOPHYSIOLOGY (T)
Date & Session of Exam : 07-09-2023 F

S.No	Register No.	Name of the Student	Signature of the Student
101	560021516597	VASANTHA KUMAR A	
102	560021516598	VINEETHKUMAR S	
103	560021516599	YUVARAJ M	ABSENT


07/09/2023 (A. ROBINATHA)

Signature of the Invigilator


Signature of the Chief Superintendent

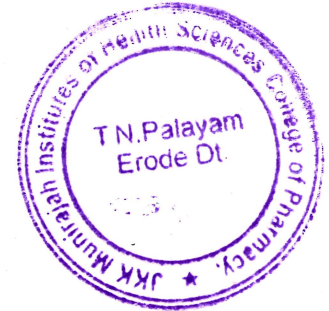
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College of Pharmacy, T.N.Palayam,
Gobi (Tk), Erode (Dt) - 638 506

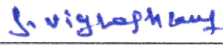


THE TAMIL NADU Dr. M.G.R. MEDICAL UNIVERSITY

69, ANNA SALAI, GUINDY, CHENNAI- 600 032.

ATTENDANCE SHEET

Course : 56.B.Pharm. THIRD SEMESTER
Month & Year of Exam : MAR 2023
Exam Center : 649.JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES, COLLEGE OF PHARMACY, ERODE
Subject / Paper : 562037 - PHARMACEUTICAL ENGINEERING (T)
Date & Session of Exam : 15-09-2023 A

S.No	Register No.	Name of the Student	Signature of the Student
1	560022516595	VIGNESHKUMAR S	


Signature of the Invigilator


Signature of the Chief Superintendent

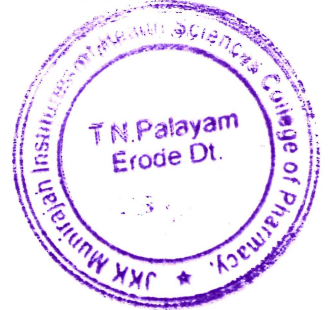
NOTE :

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UNIVERSITY EXAMINATIONS
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COLLEGE OF PHARMACY, T.N.PALAYAM,
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69, ANNA SALAI, GUINDY, CHENNAI- 600 032.

ATTENDANCE SHEET

Month & Year of Exam :

MAR 2023

Course : 56.B.Pharm. FOURTH SEMESTER

Exam Center : 649.JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES, COLLEGE OF PHARMACY, ERODE

Subject / Paper : 562046 - PHARMACOGNOSY AND PHYTOCHEMISTRY I (T)

Date & Session of Exam : 08-09-2023 A

S.No	Register No.	Name of the Student	Signature of the Student
1	560020516501	ABINATH A	
2	560020516502	ABIRAMI K	
3	560020516503	ABIRAMI L	
4	560020516504	AINESH S	
5	560020516505	AJAY A	
6	560020516506	AKASH G	
7	560020516508	ARAVIND V	
8	560020516509	ARAVINDHAN V	
9	560020516510	ARIVAZHAGAN S	
10	560020516511	ARUN A	
11	560020516512	ARUN PRAVIN K R	
12	560020516513	ARUNBHARATHI A	
13	560020516514	AYYANAR A	
14	560020516515	BHARATH KUMAR T	
15	560020516516	DHAMOTHARAN T	ABSENT
16	560020516518	DIVYA R	
17	560020516519	ESWARAN A	
18	560020516521	GIRIDHARAGANAPATHI R	
19	560020516522	GOKULNATH K	
20	560020516523	GOKULPRASATH K	

J. Priya (J. PRIYA)

Signature of the Invigilator

Signature of the Chief Superintendent

NOTE :

- Candidates who are NOT present may be noted as absent against their register nos.
- Separate format may be used by each invigilator.

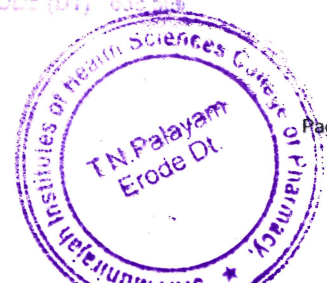
08/09/23 (S. KANNAN)
 CHIEF SUPERINTENDENT
 UNIVERSITY EXAMINATIONS
 COLLEGE CODE No : 649
 JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES
 COLLEGE OF PHARMACY, T.N.PALAYAM,
 GOBI (TK) ERODE (DT) 645010

Principal

JKK Munirajah Institute of Health Sciences,
 College of Pharmacy, T.N.Palayam,
 Gobi (Tk), Erode (Dt) - 638 506

Report Taken by 649R2

Date & Time: 24/8/2023, 10:11:02 am



THE TAMIL NADU Dr. M.G.R. MEDICAL UNIVERSITY

69, ANNA SALAI, GUINDY, CHENNAI- 600 032.

ATTENDANCE SHEET

Month & Year of Exam :

MAR 2023

Course : 56.B.Pharm. FOURTH SEMESTER

Exam Center : 649.JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES, COLLEGE OF PHARMACY, ERODE

Subject / Paper : 562046 - PHARMACOGNOSY AND PHYTOCHEMISTRY I (T)

Date & Session of Exam : 08-09-2023 A

S.No	Register No.	Name of the Student	Signature of the Student
21	560020516524	GOPINATH P	P. Gopinath
22	560020516526	GRACY S	S. Gracy
23	560020516527	GUNA N	N. Gunan
24	560020516528	JEEVA M	M. Jeeva
25	560020516530	KALAIMUHILAN B	B. Kalaimuhilan
26	560020516531	KALEESWARAN K	K. Kaleeswaran
27	560020516532	KARTHIKEYAN C	C. Karthikeyan
28	560020516533	KEERTHANA S	S. Keerthana
29	560020516534	KEERTHIKA A	A. Keerthika
30	560020516535	KESAVAMOORTHY S	S. Kesavamoorthy
31	560020516536	KISHORE M	M. Kishore
32	560020516537	KOKILA V	V. Kokila
33	560020516538	KOWSALYA S	S. Kowsalya
34	560020516539	LOKESHWARAN E	E. Lokeshwaran
35	560020516540	MADHANKUMAR M	M. Madhankumar
36	560020516542	MANIGANDAN N	N. Manigandan
37	560020516543	MANIKANDAN N	N. Manikandan
38	560020516544	MANOJ PRAKASH S	S. Manoj Prakash
39	560020516546	MITHUNCHAKRAVARTHI S	S. Mithunchakravarthi
40	560020516547	MONISHA M	M. Monisha

1. J. Priya (J. PRIYA)

2. K. Abhinaya (K. Abhinaya)
08/09/23

Signature of the Invigilator

Signature of the Chief Superintendent

CHIEF SUPERINTENDENT
UNIVERSITY EXAMINATIONS

COLLEGE CODE No : 649

JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES
COLLEGE OF PHARMACY, T.N.PALAYAM,
GOBI (TK), ERODE (Dt), 638 506

NOTE :

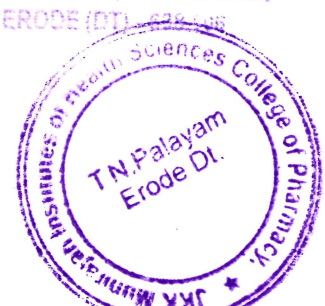
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Principal

JKK Munirajah Institute of Health Sciences
College of Pharmacy, T.N.Palayam,
Gobi (Tk), Erode (Dt) 638 506

Report Taken by 649R2

Date & Time: 24/8/2023, 10:11:02 am



THE TAMIL NADU Dr. M.G.R. MEDICAL UNIVERSITY

69, ANNA SALAI, GUINDY, CHENNAI- 600 032.

ATTENDANCE SHEET

Month & Year of Exam :

MAR 2023

Course : 56.B.Pharm. FOURTH SEMESTER

Exam Center : 649.JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES, COLLEGE OF PHARMACY, ERODE

Subject / Paper : 562046 - PHARMACOGNOSY AND PHYTOCHEMISTRY I (T)

Date & Session of Exam : 08-09-2023 A

S.No	Register No.	Name of the Student	Signature of the Student
41	560020516548	MOWLISHWARAN R	R. Mowliswaran
42	560020516550	NAVEEN V	V. Naveen
43	560020516551	PAVITHRA S	Pavithra S
44	560020516552	PERARASAN M	P. Perarasan
45	560020516553	POOVENTHAN K	P. Pooventhan
46	560020516554	PRAVEEN V	P. Praveen
47	560020516555	RAJ NARENDRAN M	M. Raj
48	560020516556	RAMYA E	E. Ramya
49	560020516557	RANJITH KUMAR R	R. Ranjith
50	560020516558	RANJITHKUMAR S	S. Ranjith
51	560020516559	RISHIKESAVAN M	M. Rishikesavan
52	560020516560	RUTHNAKUMAR S	S. Ruthna
53	560020516561	RUVITHA P	P. Ruvitha
54	560020516562	SARANATHI K	K. Sarathi
55	560020516563	SARATHI D	D. Sarathi
56	560020516564	SATHISH S	S. Sathish
57	560020516566	SHAJAHAN S	S. Shajahan
58	560020516567	SONA R	R. Sona
59	560020516568	SOUNDAR K	K. Soundar
60	560020516569	SUBARANJANI P G	G. Subarajani

1. K. Abhenaya
2. S. Vanitha

Signature of the Invigilator

Signature of the Chief Superintendent

NOTE :

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Principal

JKK Munirajah Institute of Health Sciences
College of Pharmacy, T.N. Palayam,
Gobi (Tk), Erode (Dt) - 638 506

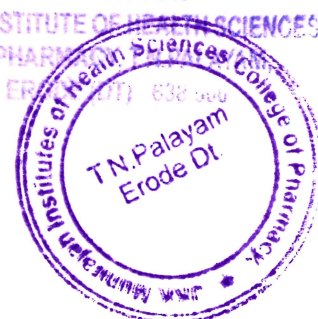
Report Taken by 649R2

Date & Time: 24/8/2023, 10:11:02 am

S. Kannan
08/09/23 (S. KANNAN)

CHIEF SUPERINTENDENT
UNIVERSITY EXAMINATIONS
COLLEGE CODE No : 649

JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES
COLLEGE OF PHARMACY
GOBI (TK) ERODE (DT) - 638 506



THE TAMIL NADU Dr. M.G.R. MEDICAL UNIVERSITY

69, ANNA SALAI, GUINDY, CHENNAI- 600 032.

ATTENDANCE SHEET

Month & Year of Exam : MAR 2023

Course : 56.B.Pharm. FOURTH SEMESTER

Exam Center : 649.JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES, COLLEGE OF PHARMACY, ERODE

Subject / Paper : 562046 - PHARMACOGNOSY AND PHYTOCHEMISTRY I (T)

Date & Session of Exam : 08-09-2023 A

S.No	Register No.	Name of the Student	Signature of the Student
61	560020516570	SUNDARRAJAN G	G. Sundar Rajan
62	560020516571	SURENDHAR M	M. Surendhar
63	560020516572	SUSEENDHARAN V A	V. A. Suseendharan
64	560020516573	TAMILSELVAM T	T. Tamilselvam
65	560020516574	THAIARASAN V	V. Thairasan
66	560020516575	TIVIN T V	T. V. Tivin
67	560020516576	VAITHEESWARAN V	V. Vaitheeswaran
68	560020516577	VENKATESA PERUMAL M	M. Venkatesa Perumal
69	560020516578	VIGNESHWARAN S	S. Vigneshwaran
70	560020516579	VIJAY V	V. Vijay
71	560020516580	VIJO G	G. Vijo
72	560020516581	VIMAL P	P. Vimal
73	560020516583	YOGESHWARAN N	N. Yogeshwaran
74	560020516584	YUVARAJ KRISHNAN N	N. Yuvaraj Krishnan

S. Vanitha
8/9/23
[VANITHA.S]

Signature of the Invigilator

A. Suresh
08/09/23
[A. Suresh]

Signature of the Chief Superintendent

NOTE :

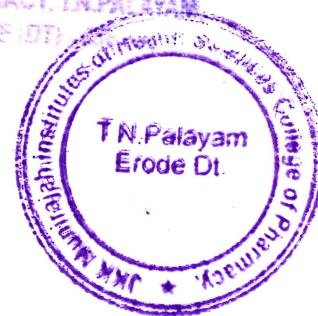
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- ii. Separate format may be used by each invigilator.

yan

Principal

JKK Munirajah Institute of Health Sciences
College of Pharmacy, T.N.Palayam,
Gobi (Tk), Erode (Dt) - 638 506

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COLLEGE CODE No : 649
JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES
COLLEGE OF PHARMACY, T.N.PALAYAM
GOBI (TK), ERODE (DT)



THE TAMIL NADU Dr. M.G.R. MEDICAL UNIVERSITY

69, ANNA SALAI, GUINDY, CHENNAI- 600 032.

ATTENDANCE SHEET

Course : 56.B.Pharm. FIFTH SEMESTER
Month & Year of Exam : MAR 2023
Exam Center : 649.JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES, COLLEGE OF PHARMACY, ERODE
Subject / Paper : 562058 - PHARMACEUTICAL JURISPRUDENCE (T)
Date & Session of Exam : 18-09-2023 F

S.No	Register No.	Name of the Student	Signature of the Student
1	561894014	GUNASEKARAN M	— ABSENT —
2	561994007	ARUN K	<i>[Handwritten Signature]</i>
3	561994034	HARAN K	<i>[Handwritten Signature]</i>
4	561994060	PERUMAL T	<i>[Handwritten Signature]</i>
5	561994080	SELVENDRAN S	<i>[Handwritten Signature]</i>
6	561994086	SURENDIRAN S	— ABSENT —

[Handwritten Signature] (Dr. I. BALAJI)
Signature of the Invigilator

[Handwritten Signature] (S. KANNAN)
Signature of the Chief Superintendent

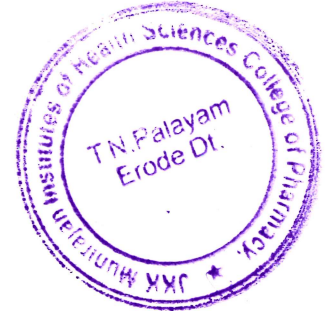
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COLLEGE OF PHARMACY, T.N.PALAYAM,
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[Handwritten Signature]
Principal

JKK Munirajah Institute of Health Sciences
College of Pharmacy, T.N.Palayam,
Gobi (Tk), Erode (Dt) - 638 506



THE TAMIL NADU Dr. M.G.R. MEDICAL UNIVERSITY

69, ANNA SALAI, GUINDY, CHENNAI- 600 032.

ATTENDANCE SHEET

Month & Year of Exam :

MAR 2023

Course : 56.B.Pharm. SIXTH SEMESTER

Exam Center : 649.JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES, COLLEGE OF PHARMACY, ERODE

Subject / Paper : 562067 - QUALITY ASSURANCE (T)

Date & Session of Exam : 11-09-2023 F

S.No	Register No.	Name of the Student	Signature of the Student
1	561894014	GUNASEKARAN M	ABSENT
2	561894018	JAGAN S	
3	561894027	MARAN S	
4	561894034	PRAKASH A	
5	561894049	SIVA K	
6	561994001	ABISHEK A S	
7	561994034	HARAN K	
8	561994050	MAYILSAMY L	
9	561994092	VEERAVEL A	
10	561994094	VETRIVEL T	
11	561994095	VIGNESH M	

Signature of the Invigilator
(S m SIVAKUMAR)

Signature of the Chief Superintendent

NOTE :
i. Candidates who are NOT present may be noted as absent against their register nos.
ii. Separate format may be used by each invigilator.

CHIEF SUPERINTENDENT
UNIVERSITY EXAMINATIONS
COLLEGE CODE No : 649
JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES
COLLEGE OF PHARMACY, T.N.PALAYAM
GOBI (TK) ERODE (DT) - 638 506

Principal
JKK Munirajah Institute of Health Sciences
College of Pharmacy, T.N.Palayam,
Gobi (Tk), Erode (Dt) - 638 506

THE TAMIL NADU Dr. M.G.R. MEDICAL UNIVERSITY

69, ANNA SALAI, GUINDY, CHENNAI- 600 032.

ATTENDANCE SHEET

Month & Year of Exam :

MAR 2022

Course : 56.B.Pharm. FOURTH SEMESTER

Exam Center : 649.JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES, COLLEGE OF PHARMACY, ERODE

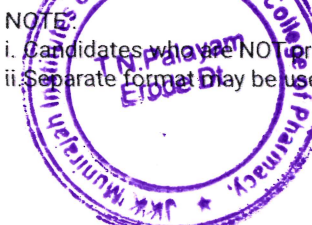
Subject / Paper : 562042 - PHYSICAL PHARMACEUTICS II (T)

Date & Session of Exam : 10-10-2022 A

S.No	Register No.	Name of the Student	Signature of the Student
1	561894019	JEEVA K	K. Jeeva
2	561894034	PRAKASH A	A. Prakash
3	561894040	RAGHUL M	M. Raghul
4	561894049	SIVA K	K. Siva
	561894050	SIVASRITHARAN M	M. Sivasritharan
6	561994003	ANJALI J	J. Anjali
7	561994005	ARISHRAMPRASATH B	B. Arishramprasath
8	561994010	ASHOK M	M. Ashok
9	561994011	BALASURYA M	M. Balasurya
10	561994014	DEEPAK P	P. Deepak
11	561994023	GIRISANKAR M	M. Girisankar
12	561994032	GOWTHAM S	— ABSENT —
13	561994041	KARTHICK KUMAR R	— ABSENT —
14	561994050	MAYILSAMY L	L. Mayilsamy
15	561994051	MOHAMED RIZWAN S	S. Mohal Rizwan
6	561994058	NITHESH G K	G. K. Nithesh
17	561994059	NITHISHKUMAR A	A. Nithish Kumar
18	561994061	PRAVEENKUMAR S	S. Praveenkumar
19	561994079	SATHISHKUMAR R	R. Sathish Kumar
20	561994086	SURENDIRAN S	— ABSENT —

Signature of the Invigilator
 S. Neha (S. Neha Antony)

Signature of the Chief Superintendent
 S. Kannan (S. KANNAN)



Principal
 JKK Munirajah Institute of Health Sciences
 College of Pharmacy, T.N.Palayam,
 Gobi (Tk), Erode (Dt) - 638 506

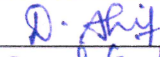

CHIEF SUPERINTENDENT
 UNIVERSITY EXAMINATIONS
 COLLEGE CODE No : 649
 JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES
 COLLEGE OF PHARMACY, T.N.PALAYAM,
 GOBI (TK), ERODE (DT) - 638 506


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THE TAMIL NADU Dr. M.G.R. MEDICAL UNIVERSITY
69, ANNA SALAI, GUINDY, CHENNAI- 600 032.

ATTENDANCE SHEET

Month & Year of Exam : MAR 2023
Course : 56.B.Pharm. SIXTH SEMESTER
Exam Center : 649.JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES, COLLEGE OF PHARMACY, ERODE
Subject / Paper : 562067 - QUALITY ASSURANCE (T)
Date & Session of Exam : 11-09-2023 F

S.No	Register No.	Name of the Student	Signature of the Student
1	560020516585	ABISHA D	
2	560020516586	JANARTHANA SUTHAN T	


Signature of the Invigilator
(G-007-SIVAKUMAR)


Signature of the Chief Superintendent
(S.KANNAN)

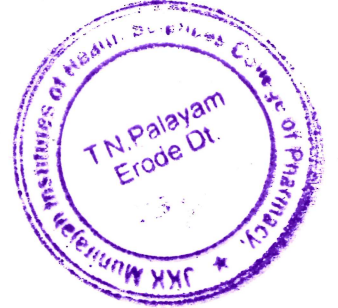
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CHIEF SUPERINTENDENT
UNIVERSITY EXAMINATIONS
COLLEGE CODE No : 649
JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES
COLLEGE OF PHARMACY, T.N.PALAYAM,
GOBI (TK), ERODE (DT) - 638 506


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JKK Munirajah Institute of Health Sciences
College of Pharmacy, T.N.Palayam,
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THE TAMIL NADU Dr. M.G.R. MEDICAL UNIVERSITY

69, ANNA SALAI, GUINDY, CHENNAI- 600 032.

ATTENDANCE SHEET

Month & Year of Exam :

MAR 2023

Course : 56.B.Pharm. SEVENTH SEMESTER

Exam Center : 649.JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES, COLLEGE OF PHARMACY, ERODE

Subject / Paper : 562075 - NOVEL DRUG DELIVERY SYSTEM (T)

Date & Session of Exam : 15-09-2023 A

S.No	Register No.	Name of the Student	Signature of the Student
1	561894005	BARATH M	M. Barath
2	561894007	GODWIN G	Godwin G
3	561894019	JEEVA K	K. Jeeva
4	561894028	MOHAMED SABEEL V	M. Sabeel V
5	561894034	PRAKASH A	A. Prakash
6	561894040	RAGHUL M	M. Raghul
7	561894043	RAJESH T	T. Rajesh
8	561894045	SATHISH KUMAR S	S. Sathish Kumar
9	561894050	SIVASRITHARAN M	M. Sivasritharan
10	561894051	SUNDHARAMUKIL S	S. Sundharamukil
11	561894056	UMAMAHESWARI S	— ABSENT —
12	561994002	AFRITH AHAMED S	S. Afrith Ahamed
13	561994003	ANJALI J	J. Anjali
14	561994005	ARISHRAMPRASATH B	B. Arishramprasath
15	561994006	ARUN G	G. Arun
16	561994009	ARUNA C	C. Aruna
17	561994010	ASHOK M	M. Ashok
18	561994011	BALASURYA M	M. Balasurya
19	561994012	BHARATHKUMAR S	S. Bharathkumar
20	561994013	BHUVANESHWARAN B	B. Bhuvaneshwaran

1) K. Srujana
15/09/23

Signature of the Invigilator

Signature of the Chief Superintendent

NOTE :

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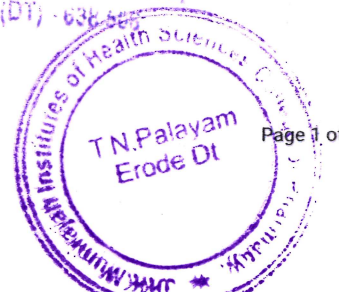
Principal

JKK Munirajah Institute of Health Sciences
College of Pharmacy, T.N.Palayam,
Gobi (Tk), Erode (Dt) - 638 506

Report Taken by 649R2

Date & Time: 24/8/2023, 10:37:05 am

Signature of the Chief Superintendent
15/09/23 (S. RANJAN)
CHIEF SUPERINTENDENT
UNIVERSITY EXAMINATIONS
COLLEGE CODE No : 649
JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES
COLLEGE OF PHARMACY, T.N.PALAYAM,
GOBI (TK), ERODE (DT) - 638 506



THE TAMIL NADU Dr. M.G.R. MEDICAL UNIVERSITY

69, ANNA SALAI, GUINDY, CHENNAI- 600 032.

ATTENDANCE SHEET

Month & Year of Exam :

MAR 2023

Course : 56.B.Pharm. SEVENTH SEMESTER

Exam Center : 649.JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES, COLLEGE OF PHARMACY, ERODE

Subject / Paper : 562075 - NOVEL DRUG DELIVERY SYSTEM (T)

Date & Session of Exam : 15-09-2023 A

S.No	Register No.	Name of the Student	Signature of the Student
21	561994014	DEEPAK P	P.D.P
22	561994015	DEVA PREETHI J	J.P.P.T.J
23	561994016	DEVARAJ P	P.Devaraj
24	561994017	DHANSHEER AHAMED A	A.Dhansheer
25	561994020	DINESH T	T.Dinesh
26	561994022	GEETHA RUBYKA S A	R.R.
27	561994023	GIRISANKAR M	M.Girisankar
28	561994024	GODWIN MOSES M	M.Godwin
29	561994025	GOKUL S	S.Gokul
30	561994026	GOKULKANNAN J	J.Gokulkannan
31	561994028	GOMATHI J	J.Gomathi
32	561994029	GOPI M	M.Gopi
33	561994030	GOPINATH K	K.Gopinath
34	561994031	GOWTHAM R	R.Gowtham
35	561994033	GOWTHAMAN P	P.Gowthaman
36	561994035	HARI PRASATH V	V.HariPrasath
37	561994036	INDRA T	T.Indra
38	561994037	JAMES JEBA BENNY G	G.JamesJebaBenny
39	561994038	JAYA PRAKASH P	P.JayaPrakash
40	561994039	JEEVANANTHAM M	M.Jeevanantham

1) K. Saranya
 Signature of the Invigilator
 15/09/23

Signature of the Chief Superintendent
 15/09/23

NOTE:

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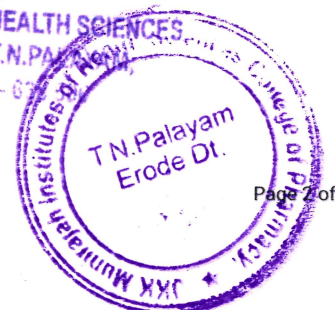
Principal

JKK Munirajah Institute of Health Sciences
 College of Pharmacy, T.N.Palayam,
 Gobi (Tk), Erode (Dt) - 638 508

Report Taken by 649R2

Date & Time: 24/8/2023, 10:37:05 am

CHIEF SUPERINTENDENT
 UNIVERSITY EXAMINATIONS
 COLLEGE CODE No : 649
 JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES
 COLLEGE OF PHARMACY, T.N.PALAYAM
 GOBI (TK), ERODE (DT) - 638 508



THE TAMIL NADU Dr. M.G.R. MEDICAL UNIVERSITY

69, ANNA SALAI, GUINDY, CHENNAI- 600 032.

ATTENDANCE SHEET

Month & Year of Exam :

MAR 2023

Course : 56.B.Pharm. SEVENTH SEMESTER

Exam Center : 649.JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES, COLLEGE OF PHARMACY, ERODE

Subject / Paper : 562075 - NOVEL DRUG DELIVERY SYSTEM (T)

Date & Session of Exam : 15-09-2023 A

S.No	Register No.	Name of the Student	Signature of the Student
41	561994042	KAVIYA M	<i>[Signature]</i>
42	561994043	KAVIYARASAN K	<i>[Signature]</i>
43	561994044	KAVIYARASU G	<i>[Signature]</i>
44	561994045	KEERTHIVASAN M	<i>[Signature]</i>
45	561994046	KIRUBHAKARAN P	<i>[Signature]</i>
46	561994047	KOKILA M	<i>[Signature]</i>
47	561994048	MANIVASAN P	<i>[Signature]</i>
48	561994049	MARUTHU PANDI R	<i>[Signature]</i>
49	561994051	MOHAMED RIZWAN S	<i>[Signature]</i>
50	561994053	MOHANRAJ V	<i>[Signature]</i>
51	561994055	NARMATHA K K	<i>[Signature]</i>
52	561994057	NAVEENA V L	<i>[Signature]</i>
53	561994059	NITHISHKUMAR A	<i>[Signature]</i>
54	561994062	PRAVEENKUMAR T	<i>[Signature]</i>
55	561994063	PRAVIN P	<i>[Signature]</i>
56	561994065	PRIYADHARSHINI V	<i>[Signature]</i>
57	561994066	RAJADURAI T	<i>[Signature]</i>
58	561994068	REETA SILLVIA S	<i>[Signature]</i>
59	561994070	SAJMA BEGHAM A	<i>[Signature]</i>
60	561994071	SAKTHIVEL P	<i>[Signature]</i>

1) Dr. S. YOGAKRISHNAN (S. JKK) *[Signature]*
 2) M. Revathi (M. JKK) *[Signature]*
 Signature of the Invigilator

[Signature] (S. KANAN)
 Signature of the Chief Superintendent

NOTE :

- i. Candidates who are NOT present may be noted as absent against their register nos.
- ii. Separate format may be used by each invigilator.

[Signature]
 Principal
 JKK Munirajah Institute of Health Sciences
 College of Pharmacy, T.N.Palayam,
 Gobi (Tk), Erode (Dt) - 638 506

CHIEF SUPERINTENDENT
 UNIVERSITY EXAMINATIONS
 COLLEGE CODE No : 649
 JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES
 COLLEGE OF PHARMACY, T.N.PALAYAM,
 GOBI (TK), ERODE (DT) - 638 506
 T.N.Palayam
 Erode Dt.

THE TAMIL NADU Dr. M.G.R. MEDICAL UNIVERSITY

69, ANNA SALAI, GUINDY, CHENNAI- 600 032.

ATTENDANCE SHEET

Month & Year of Exam :

MAR 2023

Course : 56.B.Pharm. SEVENTH SEMESTER

Exam Center : 649.JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES, COLLEGE OF PHARMACY, ERODE

Subject / Paper : 562075 - NOVEL DRUG DELIVERY SYSTEM (T)

Date & Session of Exam : 15-09-2023 A

S.No	Register No.	Name of the Student	Signature of the Student
61	561994072	SALMANKHAN S	
62	561994074	SANJAITH S	
63	561994075	SANJAY K	
64	561994076	SANTHOSH P	
65	561994077	SANTHOSHKUMAR P	
66	561994078	SARAVANAN M	
67	561994079	SATHISHKUMAR R	
68	561994081	SIVASAKTHI S	
69	561994082	SONA R	
70	561994085	SUBIKSHA A	
71	561994087	TAMIL SELVAN S	
72	561994088	THIRUMALAINANDAA D	
73	561994090	VARSHA S	
74	561994096	VIJAYARAGHAVAN S	
75	561994097	VISHNU P	
76	561994098	YAMINI M	
77	561994099	YUVANRAJ L	

1) M. Revathi (M. 15/9/23)

2) AMUDHAVALLI K (K. 15/9/23)

Signature of the Invigilator

Signature of the Chief Superintendent

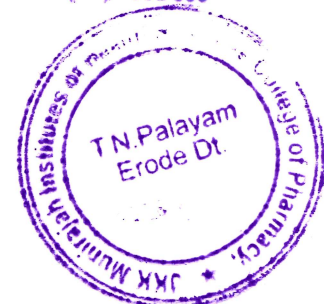
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Principal

JKK Munirajah Institute of Health Sciences
College of Pharmacy, T.N.Palayam,
Gobi (Tk), Erode (Dt) - 638 506

CHIEF SUPERINTENDENT
UNIVERSITY EXAMINATIONS
COLLEGE CODE No : 649
JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES
COLLEGE OF PHARMACY, T.N.PALAYAM,
GOBI (TK), ERODE (DT) - 638 506



THE TAMIL NADU Dr. M.G.R. MEDICAL UNIVERSITY

69, ANNA SALAI, GUINDY, CHENNAI- 600 032.

ATTENDANCE SHEET

Course : 56.B.Pharm. SEVENTH SEMESTER
Month & Year of Exam : MAR 2023
Exam Center : 649.JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES, COLLEGE OF PHARMACY, ERODE
Subject / Paper : 562075 - NOVEL DRUG DELIVERY SYSTEM (T)
Date & Session of Exam : 15-09-2023 A

S.No	Register No.	Name of the Student	Signature of the Student
1	561994103	DINESH KUMAR V	ABSENT
2	561994119	SURYA A	A. Surya
3	561994121	VIJAY S	S. Vijay

Ka. Anand
15/09/23 (AMUDHAVALIK)

Signature of the Invigilator

A. Suresh
15/09/23 (S. Suresh)

Signature of the Chief Superintendent

NOTE :

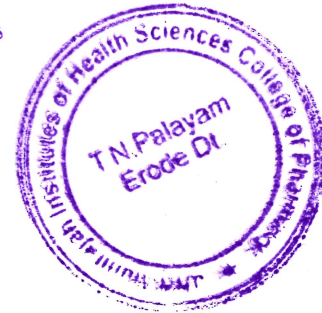
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CHIEF SUPERINTENDENT
UNIVERSITY EXAMINATIONS
COLLEGE CODE No : 649

JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES
COLLEGE OF PHARMACY, T.N.PALAYAM,
GOBI (TK), ERODE (DT) - 638 506

yes

Principal
JKK Munirajah Institute of Health Sciences
College of Pharmacy, T.N.Palayam,
Gobi (Tk), Erode (Dt) - 638 506



THE TAMIL NADU Dr. M.G.R. MEDICAL UNIVERSITY
69, ANNA SALAI, GUINDY, CHENNAI- 600 032.

ATTENDANCE SHEET

Course : 56.B.Pharm. EIGHTH SEMESTER
Month & Year of Exam : MAR 2023
Exam Center : 649.JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES, COLLEGE OF PHARMACY, ERODE
Subject / Paper : 562085 - COSMETIC SCIENCE (T)
Date & Session of Exam : 31-08-2023 F

S.No	Register No.	Name of the Student	Signature of the Student
1	561794052	THAMARAI KANNAN K	K. Thi
2	561894005	BARATH M	M. Barath
3	561894021	KALYANKUMAR H	H. Kalyankumar
4	561894023	LALILKUMAR M	M. Lalilkumar
5	561894025	MANIRAJ V	V. Maniraj
6	561894047	SELVAMANI R	R. Selvamani
7	561894050	SIVASRITHARAN M	M. Sivasritharan
8	561894051	SUNDHARAMUKIL S	S. Sundharamukil
9	561894056	UMAMAHESWARI S	ABSENT
10	561894064	PRAVEEN KUMAR R	R. Praveen Kumar

[Signature]
31/8/23 (K. KANA GAJAPRIYA)

Signature of the Invigilator

[Signature]
31/08/23 (S. KANNAN)

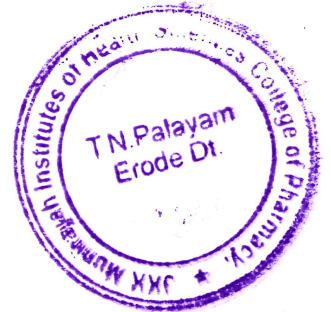
Signature of the Chief Superintendent

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CHIEF SUPERINTENDENT
UNIVERSITY EXAMINATIONS
COLLEGE CODE No : 649
JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES
COLLEGE OF PHARMACY, T.N.PALAYAM,
GOBI (TK), ERODE (DT) - 638 508

[Signature]
Principal
JKK Munirajah Institute of Health Sciences
College of Pharmacy, T.N.Palayam,
Gobi (Tk), Erode (Dt) - 638 508



THE TAMIL NADU Dr. M.G.R. MEDICAL UNIVERSITY

69, ANNA SALAI, GUINDY, CHENNAI- 600 032.

ATTENDANCE SHEET

Month & Year of Exam :

MAR 2023

Course : 56.B.Pharm. EIGHTH SEMESTER

Exam Center : 649.JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES, COLLEGE OF PHARMACY, ERODE

Subject / Paper : 562085 - COSMETIC SCIENCE (T)

Date & Session of Exam : 31-08-2023 F

S.No	Register No.	Name of the Student	Signature of the Student
1	561994100	ARUNKUMAR P.	P. Arun Jay
2	561994105	JAGANATHAN S	S. Jagannathan
3	561994112	PRAPANCHAN G	G. Prapanchan
4	561994116	SANTHANAKUMAR B	B. Santhana Kumar
5	561994119	SURYA A	A. Surya
6	561994121	VIJAY S	S. Vijay

(Handwritten signature)
31/8/23

(Handwritten signature)
Signature of the Invigilator

(Handwritten signature)
31/8/23 (S. KANNAN)

Signature of the Chief Superintendent

NOTE :

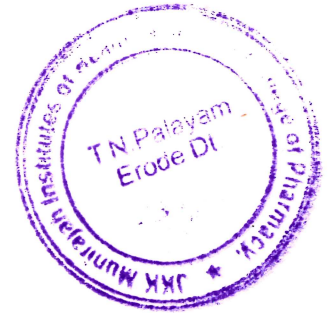
- i. Candidates who are NOT present may be noted as absent against their register nos.
- ii. Separate format may be used by each invigilator.

CHIEF SUPERINTENDENT
UNIVERSITY EXAMINATIONS
COLLEGE CODE No : 649

JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES
COLLEGE OF PHARMACY, T.N.PALAYAM,
Gobi (Tk), Erode (Dt) - 638 506

(Handwritten signature)
Principal

JKK Munirajah Institute of Health Sciences
College of Pharmacy, T.N.Palayam,
Gobi (Tk), Erode (Dt) - 638 506



THE TAMIL NADU Dr. M.G.R. MEDICAL UNIVERSITY
69, ANNA SALAI, GUINDY, CHENNAI- 600 032.

ATTENDANCE SHEET

Month & Year of Exam : OCT 2023

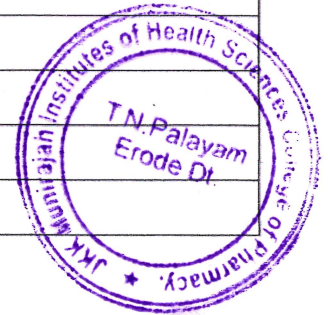
Course : 38.Pharm D FIRST YEAR

Exam Center : 649.JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES, COLLEGE OF PHARMACY, ERODE

Subject / Paper : 383805 - PHARMACEUTICAL INORGANIC CHEMISTRY

Date & Session of Exam : 07-11-2023 F

S.No	Register No.	Name of the Student	Signature of the Student
1	380021516518	SHAFEEQ S	
2	380021516527	THANISH T	
3	380022516501	ABARNA M	
4	380022516502	ANJANA SATHYAN	
-	380022516503	CHANDRU K	
6	380022516504	DANSHA MERLIN GOLD E	
7	380022516505	HARIBASKAR R	
8	380022516506	HARISH KUMAR M	
9	380022516507	KARTHIKA SHRI R R	
10	380022516508	KARUPPASAMY C	
11	380022516509	LOGESWARI R	
12	380022516510	LOKESH S	
13	380022516511	MANOBALAN M	
14	380022516512	MANOJ KUMAR R	
15	380022516513	NAMBI RAM N S	
6	380022516514	NAVEENKUMAR MANNAR	
17	380022516516	PRIYADHARSHINI S	
18	380022516517	RAMABIRAN S	
19	380022516518	RASHVIN C V	
20	380022516519	SATHIYAPRIYA M	



NAVANEETHAKRISHNAN S (Signature)

Signature of the Invigilator

Principal
Signature of the Chief Superintendent
KK Munirajah Institute of Health Sciences
College of Pharmacy, T.N. Palayam
Erode Dt. (Dist) 645 006
GOVT. SUPERINTENDENT

NOTE :

- i. Candidates who are NOT present may be noted as absent against their register no.
- ii. Separate format may be used by each invigilator.

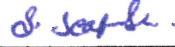
UNIVERSITY EXAMINATIONS
COLLEGE CODE No : 649
JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES
COLLEGE OF PHARMACY, T.N. PALAYAM,
ERODE, ERODE, (DT) - 645 006

THE TAMIL NADU Dr. M.G.R. MEDICAL UNIVERSITY
69, ANNA SALAI, GUINDY, CHENNAI- 600 032.

ATTENDANCE SHEET

Month & Year of Exam : OCT 2023

Course : 38.Pharm D FIRST YEAR
Exam Center : 649.JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES, COLLEGE OF PHARMACY, ERODE
Subject / Paper : 383805 - PHARMACEUTICAL INORGANIC CHEMISTRY
Date & Session of Exam : 07-11-2023 F

S.No	Register No.	Name of the Student	Signature of the Student
21	380022516520	SELVABALAJI S	

NAVANEETHAKRISHNAN S (9.11/23)
07/11/23

Signature of the Invigilator

Signature of the Chief Superintendent

CHIEF SUPERINTENDENT
UNIVERSITY EXAMINATIONS
COLLEGE CODE No : 649

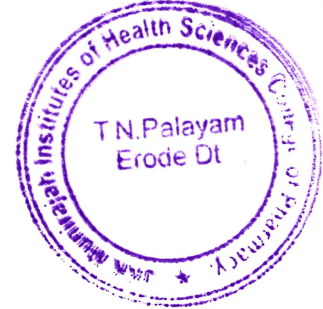
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JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES
COLLEGE OF PHARMACY T.N.PALAYAM,
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Gobi (Tk), Erode (Dt) - 638 506



THE TAMIL NADU Dr. M.G.R. MEDICAL UNIVERSITY

69, ANNA SALAI, GUINDY, CHENNAI- 600 032.

ATTENDANCE SHEET

Month & Year of Exam :

APR 2023

Course : 38.Pharm D FIRST YEAR

Exam Center : 649.JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES, COLLEGE OF PHARMACY, ERODE

Subject / Paper : 383805 - PHARMACEUTICAL INORGANIC CHEMISTRY

Date & Session of Exam : 24-04-2023 F

S.No	Register No.	Name of the Student	Signature of the Student
1	380021516501	ABDUL BASIDH M	M. Abdul basidi
2	380021516502	AJAY M	M. AJAY
3	380021516503	DHANUSH KUMAR R	R. Dhana
4	380021516504	HARISH M	m.harish
5	380021516505	INDHUJA I	I. Indhujia
6	380021516506	JAGADEESHKUMAR P	P. Jagadeesh
7	380021516508	MANMATHAN V	V. Manmathan
8	380021516509	MOHAMED MUHSEEN M	M. Muhseen
9	380021516510	MONIK RAJ T	T. Monik Raj
10	380021516511	MOWLISWAR S	S. Mowliswar
11	380021516512	NANDHA S	S. Nandha
12	380021516513	PRAVINRAJ N	N. Pravin
13	380021516514	PRIYADHARSHINI S	S. Priyadharshini
14	380021516515	ROHAN S	S. Rohan
15	380021516516	SAKTHIVEL S	S. Sakthivel
16	380021516517	SARANYA T	T. Saranya
17	380021516518	SHAFEEQ S	S. Shafeeq
18	380021516519	SIVAPRAKASH V	V. Sivaprakash
19	380021516520	SOUNDARYA S	S. Soundarya
20	380021516521	STEPHAN D	D. Stephan

(Handwritten Signature)
24/04/23

(NAVANEETHAKRISHNAN S)

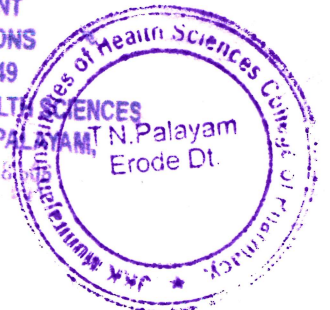
Signature of the Invigilator

(Handwritten Signature)
24/04/23 (SIRAHMAN)

Signature of the Chief Superintendent

CHIEF SUPERINTENDENT
UNIVERSITY EXAMINATIONS
COLLEGE CODE No : 649

JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES
COLLEGE OF PHARMACY, T.N.PALAYAM
GOBI (TK), ERODE (DT) - 638 505



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(Handwritten Signature)

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JKK Munirajah Institute of Health Sciences
College of Pharmacy, T.N.Palayam,
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THE TAMIL NADU Dr. M.G.R. MEDICAL UNIVERSITY

69, ANNA SALAI, GUINDY, CHENNAI- 600 032.

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Month & Year of Exam :

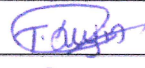
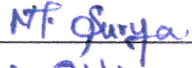
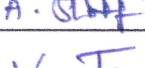
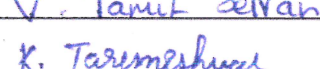
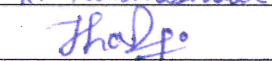

APR 2023

Course : 38.Pharm D FIRST YEAR

Exam Center : 649.JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES, COLLEGE OF PHARMACY, ERODE

Subject / Paper : 383805 - PHARMACEUTICAL INORGANIC CHEMISTRY

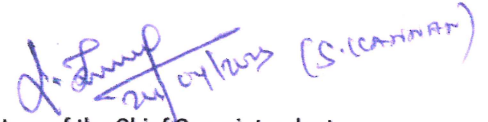
Date & Session of Exam : 24-04-2023 F

S.No	Register No.	Name of the Student	Signature of the Student
21	380021516522	SUJIN T	
22	380021516523	SURYA M	
23	380021516524	SWETHA A	
24	380021516525	TAMIL SELVAN V	
25	380021516526	TARUNESHVAR K	
26	380021516527	THANISH T	


24/04/23

(NAVANEETHAKRISHNAN.S)

Signature of the Invigilator


24/04/23 (S. CAJINAR)

Signature of the Chief Superintendent

NOTE :

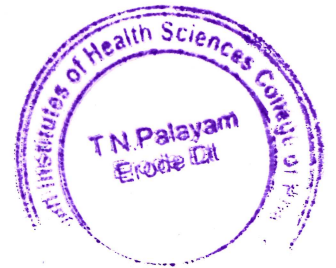
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UNIVERSITY EXAMINATIONS
COLLEGE CODE No : 649
JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES
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THE TAMIL NADU Dr. M.G.R. MEDICAL UNIVERSITY

69, ANNA SALAI, GUINDY, CHENNAI- 600 032.

ATTENDANCE SHEET

Month & Year of Exam :

APR 2023

Course : 38.Pharm D SECOND YEAR

Exam Center : 649.JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES, COLLEGE OF PHARMACY, ERODE

Subject / Paper : 383812 - PHARMACOTHERAPEUTICS-I

Date & Session of Exam : 09-05-2023 F

S.No	Register No.	Name of the Student	Signature of the Student
1	380020516501	ARAVINDHAN C	C. Aravindhan
2	380020516502	ARUNKUMAR M	M. Arunkumar
3	380020516503	DINESHIYA D	D. Dineshiya
4	380020516504	GURU MOORTHIN	N. Guru
5	380020516505	ILAVARASAN D M	D. M. Ilavarasan
6	380020516506	JANAT SELVIA P	J. Janat
7	380020516507	JERIF SAM S C	J. Jerif
8	380020516508	JINJA J	J. Jinja
9	380020516509	KAVIARASAN R	R. Kaviarasan
10	380020516511	NISHANTH KUMAR S	- Absent -
11	380020516512	NISHANTHI M	M. Nishanthi
12	380020516513	PRAGATHEESWARI M	M. Pragatheeswari
13	380020516514	PRAVEEN G	G. Praveen
14	380020516515	RITHIKA R P	P. Rithika
15	380020516516	SAMUVEL R	R. Samuvel
16	380020516518	SURYAPRAKASH M	M. Suryaprakash
17	380020516520	VENKATESH E	E. Venkatesh
18	380020516521	WINSHA MERLIN GOLD E	E. Winsha

I. D. B. (I. BALAJI)
9/5/23

Signature of the Invigilator

Signature of the Chief Superintendent

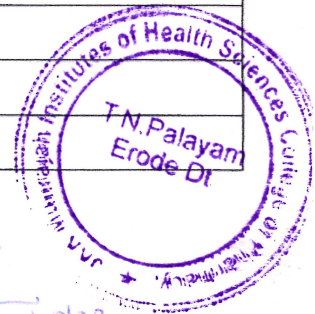
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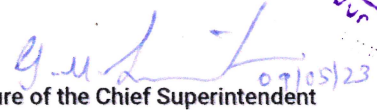
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09/05/23

S. M. SIVAKUMAR
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COLLEGE CODE No : 649

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ATTENDANCE SHEET

Month & Year of Exam : APR 2023

Course : 2611.M.Pharm. SECOND SEMESTER

Exam Center : 649.JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES, COLLEGE OF PHARMACY, ERODE

Subject / Paper : 262938 - COSMETIC AND COSMECEUTICALS

Date & Session of Exam : 22-08-2023 F

S.No	Register No.	Name of the Student	Signature of the Student
1	261121516501	BHARANI T	Bharani T
2	261121516502	DEVI BALA N	Devi Balan
3	261121516503	KAVIYA K	K. Kaviya
4	261121516504	LOGESH E	E. Logesh
5	261121516505	MANIMEKALA K	Manimekala K
6	261121516507	PRATHEEPA S	S. Pratheepa
7	261121516508	PREETHI R	R. Preethi
8	261121516509	RAJESHWARI M K	M.K. Rajeshwari
9	261121516510	VANNILA J	Vannila J
10	261121516511	VASUDEVAN G	G. Vasudevan
11	261121516512	YATHEESH R	R. Yatheesh

[Signature]
22/08/2023 (K. HOBINATH)

[Signature]
22/08/23 (S. KANNAN)

Signature of the Invigilator

Signature of the Chief Superintendent

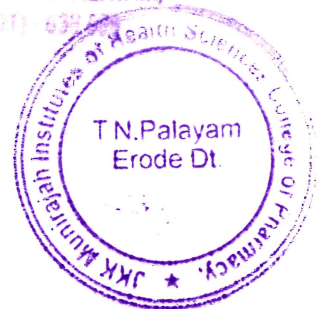
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JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES
COLLEGE OF PHARMACY, T.N. PALAYAM,
GOBI (TK), ERODE (DT) - 638 506

[Signature]

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JKK Munirajah Institute of Health Sciences
College of Pharmacy, T.N. Palayam.
Gobi (Tk), Erode (Dt) - 638 506

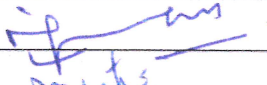



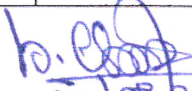
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69, ANNA SALAI, GUINDY, CHENNAI- 600 032.

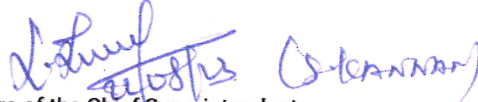
ATTENDANCE SHEET

Course : 2612.M.Pharm. SECOND SEMESTER
Month & Year of Exam : APR 2023
Exam Center : 649.JKK MUNIRAJAH INSTITUTE OF HEALTH SCIENCES, COLLEGE OF PHARMACY, ERODE
Subject / Paper : 262948 - PHARMACEUTICAL PROCESS CHEMISTRY
Date & Session of Exam : 22-08-2023 F

S.No	Register No.	Name of the Student	Signature of the Student
1	261221516501	LILLYPUSHPAM J	
2	261221516502	VANATHI B	


22/08/2023 (U. LOBINATH)

Signature of the Invigilator


Signature of the Chief Superintendent

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