

**INDUSTRIAL TRAINING SCHEDULE**

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| **STUDENT’S PARTICULARS (to be filled by student)** | | | |
| Student’s Name |  | | |
| I.C. No. @ Matric No. |  | Programme | SEBB / SEBBH / SEEE / SEEEH / SEEL / SEELH / SEEM / SKEE / SKEL / SKEM / SMBE |
| Company’s Name |  | | |
| Company’s Address |  | | |

**INSTRUCTIONS:**

Please provide a schedule of the activities over the training period.

Please submit this form to the School Supervisor during the Industrial Training Visit

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| **PART I (to be filled by student and endorsed by Industrial Supervisor)** | | | | | | | | | |
| Task (in general) | | Department/  section | | Week (please tick) | | | | | |
| 1 | 2 | 3 | 4 | 5 | 6 |
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| Task (in general) | | Department/  section | | Week (please tick) | | | | | |
| 7 | 8 | 9 | 10 | 11 | 12 |
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| Industrial Supervisor’s Endorsement | | | | | | | | | |
| Supervisor’s Name |  | Designation | |  | | | | | |
| Signature and stamp |  | Date | |  | | | | | |
| **PART II (to be filled by School Supervisor)** | | | | | | | | | |
| Supervisor’s comment on work progress (if required) | | | | | | | | | |
| Supervisor’s Name |  | | | | | | | | |
| Signature |  | | Date |  | | | | | |