

**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 |  |