

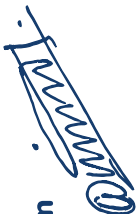
MONTH		PARENT'S OBJECTIONS/SUGGESTIONS		TEACHER'S OBJECTIONS/SUGGESTIONS	
JANUAR					
FABRUARY					
MARCH					
APRIL					
MAY					
JUNE					
JULY					
AUGUST					
SEPTEMBER					
OCTOBER					
NOVEMBER					
DECEMBER					

ASSESSMENT & PROGRESS REPORT

STUDENT'S NAME _____ FATHER'S NAME _____ CLASS _____ ROLL NO _____ YEAR _____

MONTH	Presents	Absents	Holidays	Uniform	Parent's Sign On Dairy	Parent's Objections	Teacher's Objections	Position in Class	PTM Attended	Signature Parents	Signature Principal
FEBRUARY											
MARCH											
APRIL											
MAY											
JUNE											
JULY											
AUGUST											
SEPTEMBER											
OCTOBER											
NOVEMBER											
DECEMBER											
JANUARY											

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