

G. B. SHAH COMMERCE COLLEGE



(Recognized by UGC with 2(f) & 12(B) and Affiliated with Gujarat University)

Nr. Telephone Exchange, Vasna, Ahmedabad-380007.

Govt. of Guj. E-Gyan Code: 39

CHE Zone: 91, CHE Code: 42

Uni. Code: 066

Tel. No. +91-79-2660 5232

E-mail: gbcc066@gmail.com

Website: www.gbshahcollege.in

Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **ADITI SONI**

Class: **B. Com. Sem.-6**

Roll No. **1**

GU Enrolment No.: **202303104301**

ABC ID: **566069926005**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **AGRAVAT VAIBHAVKUMAR KIRITBHAI**

Class: **B. Com. Sem.-6**

Roll No. **2**

GU Enrolment No.: **202303104303**

ABC ID: **790404731960**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **AGRAWAL HEMAKSHI GOPALBHAI**

Class: **B. Com. Sem.-6**

Roll No. **3**

GU Enrolment No.: **202303104304**

ABC ID: **363608156610**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **AJMERI MAHIM ZAHIRBHAI**

Class: **B. Com. Sem.-6**

Roll No. **4**

GU Enrolment No.: **202303104305**

ABC ID: **979552829142**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **AKABARI PRIYANSIBEN ANILBHAI**

Class: **B. Com. Sem.-6**

Roll No. **5**

GU Enrolment No.: **202303104306**

ABC ID: **385873882019**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **AKBARI MONILKUMAR JIGNESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **6**

GU Enrolment No.: **202303104307**

ABC ID: **485308193221**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

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Signature of Faculty Mentor: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **AKSHITA JAIN**

Class: **B. Com. Sem.-6**

Roll No. **7**

GU Enrolment No.: **202303104308**

ABC ID: **401608062414**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **AMIN UTSAV SANJAYBHAI**

Class: **B. Com. Sem.-6**

Roll No. **8**

GU Enrolment No.: **202303104309**

ABC ID: **138960394616**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **ANSARI ASHER SAMIURREHMAN**

Class: **B. Com. Sem.-6**

Roll No. **9**

GU Enrolment No.: **202303104311**

ABC ID: **902373112648**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **ANSARI KANIJFATEMA RIYAZAHMAD**

Class: **B. Com. Sem.-6**

Roll No. **10**

GU Enrolment No.: **202303104312**

ABC ID: **570635477186**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **AYAR DIVYESH GHANSHYAMBHAI**

Class: **B. Com. Sem.-6**

Roll No. **11**

GU Enrolment No.: **202303104315**

ABC ID: **211627936258**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **AYAR PURVABEN GHANSHYAMBHAI**

Class: **B. Com. Sem.-6**

Roll No. **12**

GU Enrolment No.: **202303104316**

ABC ID: **542135538850**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **BAGUL RUDRESHKUMAR BHADRESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **13**

GU Enrolment No.: **202303104317**

ABC ID: **168529985719**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **BATAVIYA PRIYANSHI HITESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **14**

GU Enrolment No.: **202303104319**

ABC ID: **948193017523**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **BAVARAVA MIT JAYANTIBHAI**

Class: **B. Com. Sem.-6**

Roll No. **15**

GU Enrolment No.: **202303104320**

ABC ID: **756409927184**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **BAVISHI DENISHA MUKESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **16**

GU Enrolment No.: **202303112367**

ABC ID: **119876579632**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **BAVRI KUNAL JITANBHAI**

Class: **B. Com. Sem.-6**

Roll No. **17**

GU Enrolment No.: **202303104321**

ABC ID: **623095236305**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **BECHRA KRISHABEN AMARBHAI**

Class: **B. Com. Sem.-6**

Roll No. **18**

GU Enrolment No.: **202303104322**

ABC ID: **581551952315**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **BHAMMAR HITESH JIVABHAI**

Class: **B. Com. Sem.-6**

Roll No. **19**

GU Enrolment No.: **202303104323**

ABC ID: **325935316840**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **BHANUSHALI HARSH SHYAM**

Class: **B. Com. Sem.-6**

Roll No. **20**

GU Enrolment No.: **202303104325**

ABC ID: **916141839851**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

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CHE Zone: 91, CHE Code: 42

Uni. Code: 066

Tel. No. +91-79-2660 5232

E-mail: gbcc066@gmail.com

Website: www.gbshahcollege.in

Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **BHANUSHALI HARSHADKUMAR BABULAL**

Class: **B. Com. Sem.-6**

Roll No. **21**

GU Enrolment No.: **202303104326**

ABC ID: **257364251896**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **BHARWAD AMITBHAI RAMBHAI**

Class: **B. Com. Sem.-6**

Roll No. **22**

GU Enrolment No.: **202303104329**

ABC ID: **484230591223**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **BHATTI MANTHAN PRAVINBHAI**

Class: **B. Com. Sem.-6**

Roll No. **23**

GU Enrolment No.: **202303104336**

ABC ID: **731901715900**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **BHAVSAR HETAL DINESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **24**

GU Enrolment No.: **202303104337**

ABC ID: **324255479826**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **BHAYANI DEVAM MAHENDRABHAI**

Class: **B. Com. Sem.-6**

Roll No. **25**

GU Enrolment No.: **202303104338**

ABC ID: **270449467661**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **BHAYANI SUJAL MINESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **26**

GU Enrolment No.: **202303104339**

ABC ID: **541134421184**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **BHEDA RUSHIT YOGESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **27**

GU Enrolment No.: **202303104340**

ABC ID: **909345497274**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **BHOJWANI RAJ RAMBHAI**

Class: **B. Com. Sem.-6**

Roll No. **28**

GU Enrolment No.: **202303104343**

ABC ID: **965081595915**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **BHURIYA ROBIN SURESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **29**

GU Enrolment No.: **202303104345**

ABC ID: **713069495097**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **BHUVARAJ RANJEETKUMAR SADULBHAI**

Class: **B. Com. Sem.-6**

Roll No. **30**

GU Enrolment No.: **202303104347**

ABC ID: **417764726755**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **BRAHMBHATT ARYAN JATINKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **31**

GU Enrolment No.: **202303104349**

ABC ID: **370698824085**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **BUTANI KISHAN ANILBHAI**

Class: **B. Com. Sem.-6**

Roll No. **32**

GU Enrolment No.: **202303104350**

ABC ID: **634275531300**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **CHANDEL VINITA PRAKASHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **33**

GU Enrolment No.: **202303104351**

ABC ID: **746968063549**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **CHAROLIYA DHRUVKUMAR SURESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **34**

GU Enrolment No.: **202303104352**

ABC ID: **600039293355**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **CHAUDHARI OM PRAVINBHAI**

Class: **B. Com. Sem.-6**

Roll No. **35**

GU Enrolment No.: **202303104354**

ABC ID: **203279295284**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **CHAUDHARI SUSHIL SUNILBHAI**

Class: **B. Com. Sem.-6**

Roll No. **36**

GU Enrolment No.: **202303104355**

ABC ID: **742585080634**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **CHAUDHARY TIPU SUGANJI**

Class: **B. Com. Sem.-6**

Roll No. **37**

GU Enrolment No.: **202303104356**

ABC ID: **875591526127**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **CHAUHAN DARSHIL HIRENBHAI**

Class: **B. Com. Sem.-6**

Roll No. **38**

GU Enrolment No.: **202303104360**

ABC ID: **628911552866**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **CHAUHAN HARSHIL MAHESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **39**

GU Enrolment No.: **202303104362**

ABC ID: **616428911237**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **CHAUHAN HARSHIL MANISHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **40**

GU Enrolment No.: **202303104363**

ABC ID: **365818942093**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **CHAUHAN HITESH VIPULKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **41**

GU Enrolment No.: **202303104365**

ABC ID: **167095612036**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Uni. Code: 066

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **CHAUHAN NIKHIL AMARATBHAI**

Class: **B. Com. Sem.-6**

Roll No. **42**

GU Enrolment No.: **202303104368**

ABC ID: **661082969142**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **CHAUHAN PRASHANT MAHENDRA**

Class: **B. Com. Sem.-6**

Roll No. **43**

GU Enrolment No.: **202303104369**

ABC ID: **298714752464**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **CHAUHAN RIDDHU ARVINDBHAI**

Class: **B. Com. Sem.-6**

Roll No. **44**

GU Enrolment No.: **202303104371**

ABC ID: **632937883409**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **CHAUHAN SMIT KISHORKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **45**

GU Enrolment No.: **202303104373**

ABC ID: **635570387864**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **CHELARAMANI MAHEK VASUDEV**

Class: **B. Com. Sem.-6**

Roll No. **46**

GU Enrolment No.: **202303104377**

ABC ID: **407966779470**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **CHISTI MOHAMMEDJUBER MOHAMMEDSUFIYAN**

Class: **B. Com. Sem.-6**

Roll No. **47**

GU Enrolment No.: **202303104378**

ABC ID: **360524108595**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **CHOTHANI GAURAV VIPULBHAI**

Class: **B. Com. Sem.-6**

Roll No. **48**

GU Enrolment No.: **202303104379**

ABC ID: **604853944768**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **DABGAR KRISH MAHESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **49**

GU Enrolment No.: **202303104385**

ABC ID: **855737230651**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **DADLANI KARINA RAVI**

Class: **B. Com. Sem.-6**

Roll No. **50**

GU Enrolment No.: **202303104386**

ABC ID: **67092831000**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **DALVADI DHRUVKUMAR BHAVESHKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **51**

GU Enrolment No.: **202303104389**

ABC ID: **403034430759**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

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Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **DANTALIYA JAIMIN RAMESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **52**

GU Enrolment No.: **202303104391**

ABC ID: **224461296538**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **DER DHARMIK RANJITBHAI**

Class: **B. Com. Sem.-6**

Roll No. **53**

GU Enrolment No.: **202303104397**

ABC ID: **444189290227**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **DESAI DIVYANG KANUBHAI**

Class: **B. Com. Sem.-6**

Roll No. **54**

GU Enrolment No.: **202303104399**

ABC ID: **143042376043**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **DESAI MEET JAYRAMBHAI**

Class: **B. Com. Sem.-6**

Roll No. **55**

GU Enrolment No.: **202303104402**

ABC ID: **550312009269**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **DESAI NITIN AMRATBHAI**

Class: **B. Com. Sem.-6**

Roll No. **56**

GU Enrolment No.: **202303104404**

ABC ID: **473862490484**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **DESAI RONAK VISHNUBHAI**

Class: **B. Com. Sem.-6**

Roll No. **57**

GU Enrolment No.: **202303104405**

ABC ID: **762322983362**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **DEVAIYA URVASHI KAMLESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **58**

GU Enrolment No.: **202303104407**

ABC ID: **677719499398**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **DEVAM PRADYUMAN MEHTA**

Class: **B. Com. Sem.-6**

Roll No. **59**

GU Enrolment No.: **202303121924**

ABC ID: **323604296644**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **DHAMECHA ROHAN ASHOKBHAI**

Class: **B. Com. Sem.-6**

Roll No. **60**

GU Enrolment No.: **202303104408**

ABC ID: **24443399328**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **DHAMI UTSAV KANUBHAI**

Class: **B. Com. Sem.-6**

Roll No. **61**

GU Enrolment No.: **202303100152**

ABC ID: **981605334446**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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CHE Zone: 91, CHE Code: 42

Uni. Code: 066

Tel. No. +91-79-2660 5232

E-mail: gbcc066@gmail.com

Website: www.gbshahcollege.in

Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **DHIRAWAT PRIYANSHU JAY KUMAR**

Class: **B. Com. Sem.-6**

Roll No. **62**

GU Enrolment No.: **202303104409**

ABC ID: **806096888785**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **DOBARIYA PRIYENKUMAR ANILBHAI**

Class: **B. Com. Sem.-6**

Roll No. **63**

GU Enrolment No.: **202303104412**

ABC ID: **981034417320**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **DOBARIYA VASU HASMUKHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **64**

GU Enrolment No.: **202303104414**

ABC ID: **907730478739**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **DOMADIYA CHINTAN ASHVINBHAI**

Class: **B. Com. Sem.-6**

Roll No. **65**

GU Enrolment No.: **202303104418**

ABC ID: **311371774710**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **DOSHI DIYA PARESHKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **66**

GU Enrolment No.: **202303104419**

ABC ID: **985479271610**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **DOSHI PRISHA JIGNESH**

Class: **B. Com. Sem.-6**

Roll No. **67**

GU Enrolment No.: **202303104420**

ABC ID: **731612443898**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **DOSHI VEER DINESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **68**

GU Enrolment No.: **202303104421**

ABC ID: **925265846322**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **DUBASIYA ANSHIKA MANOJBHAI**

Class: **B. Com. Sem.-6**

Roll No. **69**

GU Enrolment No.: **202303104422**

ABC ID: **421095488099**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **FARHAT AFRIN**

Class: **B. Com. Sem.-6**

Roll No. **70**

GU Enrolment No.: **202303104424**

ABC ID: **848140007479**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **GANDHI MAITRI NIPAMKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **71**

GU Enrolment No.: **202303104426**

ABC ID: **226501159977**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **GARANGE SHALIN MAYUR**

Class: **B. Com. Sem.-6**

Roll No. **72**

GU Enrolment No.: **202303104427**

ABC ID: **982744874807**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **GHANCHI MOHAMMAD RAISH MAHAMMAD ILIYAS**

Class: **B. Com. Sem.-6**

Roll No. **73**

GU Enrolment No.: **202303104429**

ABC ID: **335542836387**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **GHANCHIVHORA NISARMAHENDI NIZAMBHAI**

Class: **B. Com. Sem.-6**

Roll No. **74**

GU Enrolment No.: **202303104431**

ABC ID: **399149341149**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **GIRI KHUSHI SHESHNATH**

Class: **B. Com. Sem.-6**

Roll No. **75**

GU Enrolment No.: **202303104433**

ABC ID: **491966468635**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **GODHANI MEETKUMAR DALPATBHAI**

Class: **B. Com. Sem.-6**

Roll No. **76**

GU Enrolment No.: **202303104434**

ABC ID: **949032086018**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **GODHANI YASH DHIRAJBHAI**

Class: **B. Com. Sem.-6**

Roll No. **77**

GU Enrolment No.: **202303104435**

ABC ID: **621631999815**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **GOHEL NIRMAL HITESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **78**

GU Enrolment No.: **202303104436**

ABC ID: **128365239760**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **GOHEL PRITIBEN HARSHADBHAI**

Class: **B. Com. Sem.-6**

Roll No. **79**

GU Enrolment No.: **202303104437**

ABC ID: **609850674192**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **GOHEL RISHIKUMAR KALPESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **80**

GU Enrolment No.: **202303104438**

ABC ID: **701085410545**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **GOHIL HARSH GHANSHYAMBHAI**

Class: **B. Com. Sem.-6**

Roll No. **81**

GU Enrolment No.: **202303104439**

ABC ID: **466105302970**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

G. B. SHAH COMMERCE COLLEGE



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Nr. Telephone Exchange, Vasna, Ahmedabad-380007.

Govt. of Guj. E-Gyan Code: 39

CHE Zone: 91, CHE Code: 42

Uni. Code: 066

Tel. No. +91-79-2660 5232

E-mail: gbcc066@gmail.com

Website: www.gbshahcollege.in

Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **GOHIL KAVANSINH JITENDRABHAI**

Class: **B. Com. Sem.-6**

Roll No. **82**

GU Enrolment No.: **202303104440**

ABC ID: **258075180384**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **GOHIL KEYURSINH JITENDRABHAI**

Class: **B. Com. Sem.-6**

Roll No. **83**

GU Enrolment No.: **202303104441**

ABC ID: **435784473481**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **GOHIL SIDDHARAJ SINH MAHENDRASINH**

Class: **B. Com. Sem.-6**

Roll No. **84**

GU Enrolment No.: **202303104444**

ABC ID: **663591164357**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **GOHIL UDITA DHARMESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **85**

GU Enrolment No.: **202303104445**

ABC ID: **427074644934**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **GORAJIYA ANSH KALPESHKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **86**

GU Enrolment No.: **202303104447**

ABC ID: **464213623042**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **GOSWAMI HARSHGIRI PARESHGIRI**

Class: **B. Com. Sem.-6**

Roll No. **87**

GU Enrolment No.: **202303104448**

ABC ID: **296732734433**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **GOSWAMI JEENAL RANJEETGIRI**

Class: **B. Com. Sem.-6**

Roll No. **88**

GU Enrolment No.: **202303104449**

ABC ID: **475570032622**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **GUPTA SIBRAN NIRAJ**

Class: **B. Com. Sem.-6**

Roll No. **89**

GU Enrolment No.: **202303104452**

ABC ID: **368082040731**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **HALAI KAMIL ASIFBHAI**

Class: **B. Com. Sem.-6**

Roll No. **90**

GU Enrolment No.: **202303104453**

ABC ID: **743778727239**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **HAPALIYA PRITESH NAVINBHAI**

Class: **B. Com. Sem.-6**

Roll No. **91**

GU Enrolment No.: **202303104454**

ABC ID: **247483451552**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **HIRANI NIRAV DINESH**

Class: **B. Com. Sem.-6**

Roll No. **92**

GU Enrolment No.: **202303104457**

ABC ID: **206128145138**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **JADEJA MAHIPALSINH NARENDRASINH**

Class: **B. Com. Sem.-6**

Roll No. **93**

GU Enrolment No.: **202303104461**

ABC ID: **293794918255**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **JADEJA VISHWAJITSINH JAGENDRASINH**

Class: **B. Com. Sem.-6**

Roll No. **94**

GU Enrolment No.: **202303104462**

ABC ID: **589710242550**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **VYAS JAIMIN RAJESHKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **95**

GU Enrolment No.: **202303104463**

ABC ID: **976774585797**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **HEENA**

Class: **B. Com. Sem.-6**

Roll No. **96**

GU Enrolment No.: **202303104456**

ABC ID: **847474759864**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **JAIN HRITIK RAJENDRA**

Class: **B. Com. Sem.-6**

Roll No. **97**

GU Enrolment No.: **202303104464**

ABC ID: **294581916178**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **JAIN KUNJAN KALPESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **98**

GU Enrolment No.: **202303104465**

ABC ID: **231771301188**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **JAISINGHANI OM RAJESH**

Class: **B. Com. Sem.-6**

Roll No. **99**

GU Enrolment No.: **202303104466**

ABC ID: **949660919111**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **JATIN SINGH RAO**

Class: **B. Com. Sem.-6**

Roll No. **100**

GU Enrolment No.: **202303104469**

ABC ID: **62157892188**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **JAYSWAL GAURANG PINAKINBHAI**

Class: **B. Com. Sem.-6**

Roll No. **101**

GU Enrolment No.: **202303104470**

ABC ID: **892774131090**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Govt. of Guj. E-Gyan Code: 39

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Uni. Code: 066

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Website: www.gbshahcollege.in

Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **JETHWANI MAHEK YOGESH**

Class: **B. Com. Sem.-6**

Roll No. **102**

GU Enrolment No.: **202303104471**

ABC ID: **427379044791**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **JOBANPUTRA DHRUVI RUPESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **103**

GU Enrolment No.: **202303104472**

ABC ID: **346921627161**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **JOGI ABHI MANOJKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **104**

GU Enrolment No.: **202303104473**

ABC ID: **513735231648**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **JOSHI RAJVI GOVINDBHAI**

Class: **B. Com. Sem.-6**

Roll No. **105**

GU Enrolment No.: **202303104474**

ABC ID: **174796663315**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **KADIYA RAGESHRI JIGNESHKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **106**

GU Enrolment No.: **202303104475**

ABC ID: **688908433215**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

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Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **KALAL MINAL NILESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **107**

GU Enrolment No.: **202303104477**

ABC ID: **556262023660**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **KALAL SAKSHI SHAILESHKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **108**

GU Enrolment No.: **202303112530**

ABC ID: **342839451691**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **KALAL TINAL NILESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **109**

GU Enrolment No.: **202303104478**

ABC ID: **571719031278**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **KAMLANI AKSHAT RAJESH**

Class: **B. Com. Sem.-6**

Roll No. **110**

GU Enrolment No.: **202303106934**

ABC ID: **686265212711**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **KAMYA BHAYANI**

Class: **B. Com. Sem.-6**

Roll No. **111**

GU Enrolment No.: **202303104479**

ABC ID: **82003912188**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **KANJARIYA DIVYESH KALABHAI**

Class: **B. Com. Sem.-6**

Roll No. **112**

GU Enrolment No.: **202303104481**

ABC ID: **489716947199**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **KANSARA TEJAS RAMESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **113**

GU Enrolment No.: **202303104482**

ABC ID: **624683658693**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **KANVANI MUDRA DINESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **114**

GU Enrolment No.: **202303104483**

ABC ID: **952425554430**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **KARMUR AKASH KHUSHALBHAI**

Class: **B. Com. Sem.-6**

Roll No. **115**

GU Enrolment No.: **202303100243**

ABC ID: **412503221295**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **KARTIK SINGHAL**

Class: **B. Com. Sem.-6**

Roll No. **116**

GU Enrolment No.: **202303104484**

ABC ID: **873824717153**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **KATBA VASU NAYANBHAI**

Class: **B. Com. Sem.-6**

Roll No. **117**

GU Enrolment No.: **202303104486**

ABC ID: **980675961920**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **KAVA KRIZ PANKAJBHAI**

Class: **B. Com. Sem.-6**

Roll No. **118**

GU Enrolment No.: **202303104488**

ABC ID: **519985250848**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **KESARIYA NEEL NARESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **119**

GU Enrolment No.: **202303104489**

ABC ID: **889575769165**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **KESARIYA PARTH RAJESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **120**

GU Enrolment No.: **202303104490**

ABC ID: **357361871638**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **KESHUR PRASHANT JITENDRABHAI**

Class: **B. Com. Sem.-6**

Roll No. **121**

GU Enrolment No.: **202303104491**

ABC ID: **308982641794**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Govt. of Guj. E-Gyan Code: 39

CHE Zone: 91, CHE Code: 42

Uni. Code: 066

Tel. No. +91-79-2660 5232

E-mail: gbcc066@gmail.com

Website: www.gbshahcollege.in

Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **KHANDELWAL DEV SANTOSHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **122**

GU Enrolment No.: **202303104492**

ABC ID: **666002150078**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **KHENI VIVEK MANSUKHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **123**

GU Enrolment No.: **202303104495**

ABC ID: **229684635076**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

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Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **KHRISTI SILVANSBHAI MANHARBHAI**

Class: **B. Com. Sem.-6**

Roll No. **124**

GU Enrolment No.: **202303104496**

ABC ID: **243689405698**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **KHUSHI ARVINDBHAI SENDHAV**

Class: **B. Com. Sem.-6**

Roll No. **125**

GU Enrolment No.: **202303104498**

ABC ID: **211245123582**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **KORAT VASU SANJAYKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **126**

GU Enrolment No.: **202303104501**

ABC ID: **984195511897**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **KORI KHUSHI CHANDRASHEKHAR**

Class: **B. Com. Sem.-6**

Roll No. **127**

GU Enrolment No.: **202303104502**

ABC ID: **944882004367**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **KOTAK ANJALIBEN SANTOSHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **128**

GU Enrolment No.: **202303104503**

ABC ID: **138554584268**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **KOTHARI HARSH PRAVEEN**

Class: **B. Com. Sem.-6**

Roll No. **129**

GU Enrolment No.: **202303104506**

ABC ID: **317652258159**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **YASH KOTHARI**

Class: **B. Com. Sem.-6**

Roll No. **130**

GU Enrolment No.: **202303104924**

ABC ID: **222536867244**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **KOTHIYA SMIT RAJUBHAI**

Class: **B. Com. Sem.-6**

Roll No. **131**

GU Enrolment No.: **202303104507**

ABC ID: **979436734957**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **KRISH TUSHARBHAI SHAH**

Class: **B. Com. Sem.-6**

Roll No. **132**

GU Enrolment No.: **202303104508**

ABC ID: **217056960407**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **KUSHAL KUMAR**

Class: **B. Com. Sem.-6**

Roll No. **133**

GU Enrolment No.: **202303104510**

ABC ID: **495070458134**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **LAKUM BRIJESHBHAI GIRISHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **134**

GU Enrolment No.: **202303104513**

ABC ID: **933648292091**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **LAMBARIYA ROHAN CHIKABHAI**

Class: **B. Com. Sem.-6**

Roll No. **135**

GU Enrolment No.: **202303104514**

ABC ID: **944274816332**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **LATHIYA DIVYESH HARESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **136**

GU Enrolment No.: **202303104515**

ABC ID: **421194550561**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **LIMBACHIYA KRISHNA JAYVANTKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **137**

GU Enrolment No.: **202303104516**

ABC ID: **776518118809**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **LODARIYA NAMRA JAYESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **138**

GU Enrolment No.: **202303104517**

ABC ID: **252432362235**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **LOKESH KUMAR PATEL**

Class: **B. Com. Sem.-6**

Roll No. **139**

GU Enrolment No.: **202303104518**

ABC ID: **468116042910**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MAHESHWARI HEENA MADANLAL**

Class: **B. Com. Sem.-6**

Roll No. **140**

GU Enrolment No.: **202303104520**

ABC ID: **305420033594**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MAHETA AGAM ASHISHKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **141**

GU Enrolment No.: **202303104521**

ABC ID: **462436305989**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Govt. of Guj. E-Gyan Code: 39

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Uni. Code: 066

Tel. No. +91-79-2660 5232

E-mail: gbcc066@gmail.com

Website: www.gbshahcollege.in

Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MAKVANA MITRAJSINH DHIRUSINH**

Class: **B. Com. Sem.-6**

Roll No. **142**

GU Enrolment No.: **202303104523**

ABC ID: **963363928381**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MAKWANA ANUJ BALVANTBHAI**

Class: **B. Com. Sem.-6**

Roll No. **143**

GU Enrolment No.: **202303104524**

ABC ID: **603162370354**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MAKWANA JAYESHBHAI MANISHKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **144**

GU Enrolment No.: **202303104525**

ABC ID: **276808702146**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MAKWANA KETANBHAI MANJIBHAI**

Class: **B. Com. Sem.-6**

Roll No. **145**

GU Enrolment No.: **202303104526**

ABC ID: **195155954118**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MAKWANA MAHI SHAILESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **146**

GU Enrolment No.: **202303104527**

ABC ID: **972936870979**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MALANI HARSHADKUMAR VANDANBHAI**

Class: **B. Com. Sem.-6**

Roll No. **147**

GU Enrolment No.: **202303104529**

ABC ID: **720061541694**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MALEK MOHAMMAD SAHIL NIZAMUDDIN**

Class: **B. Com. Sem.-6**

Roll No. **148**

GU Enrolment No.: **202303104530**

ABC ID: **970537665892**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MALEK SANIYABANU IMRANMIYA**

Class: **B. Com. Sem.-6**

Roll No. **149**

GU Enrolment No.: **202303104532**

ABC ID: **113967811168**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MALI HARSHKUMAR KANJIBHAI**

Class: **B. Com. Sem.-6**

Roll No. **150**

GU Enrolment No.: **202303104534**

ABC ID: **152456818800**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MALPARA AKBARALI SHABBIRALI**

Class: **B. Com. Sem.-6**

Roll No. **151**

GU Enrolment No.: **202303104536**

ABC ID: **614051968817**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MANGROLIYA RAVI VITTHALBHAI**

Class: **B. Com. Sem.-6**

Roll No. **152**

GU Enrolment No.: **202303104538**

ABC ID: **148504250568**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MANSURI ANJUMARFANA NIZAMUDDIN**

Class: **B. Com. Sem.-6**

Roll No. **153**

GU Enrolment No.: **202303104539**

ABC ID: **272552403080**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MANSURI MOHAMMAD SEHZAN NIZAMUDDIN**

Class: **B. Com. Sem.-6**

Roll No. **154**

GU Enrolment No.: **202303104541**

ABC ID: **651877856438**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MAURYA BHOOMI DILIPKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **155**

GU Enrolment No.: **202303104546**

ABC ID: **649228120226**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MEHTA FENY BHAVESH**

Class: **B. Com. Sem.-6**

Roll No. **156**

GU Enrolment No.: **202303104548**

ABC ID: **691788123099**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MEHTA MALAV KAMLESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **157**

GU Enrolment No.: **202303104550**

ABC ID: **618524313105**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MEHTA MOKSH MAUNIKKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **158**

GU Enrolment No.: **202303104551**

ABC ID: **420506946965**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MEHTA NAMRKUMAR HARSHADKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **159**

GU Enrolment No.: **202303104552**

ABC ID: **332621562952**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MEHTA PAXAL BHARATBHAI**

Class: **B. Com. Sem.-6**

Roll No. **160**

GU Enrolment No.: **202303104553**

ABC ID: **754303178739**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MEHTA SHREY RAKESH**

Class: **B. Com. Sem.-6**

Roll No. **161**

GU Enrolment No.: **202303104554**

ABC ID: **511949099403**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Govt. of Guj. E-Gyan Code: 39

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Uni. Code: 066

Tel. No. +91-79-2660 5232

E-mail: gbcc066@gmail.com

Website: www.gbshahcollege.in

Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **VANSH MEHTA**

Class: **B. Com. Sem.-6**

Roll No. **162**

GU Enrolment No.: **202303104898**

ABC ID: **705950463986**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MEHTA VEER RAJESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **163**

GU Enrolment No.: **202303104555**

ABC ID: **692482402873**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MEMON MUSTAKIM SHARIFBHAI**

Class: **B. Com. Sem.-6**

Roll No. **164**

GU Enrolment No.: **202303104556**

ABC ID: **314294108049**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MEPANI BHAVIK NARAN**

Class: **B. Com. Sem.-6**

Roll No. **165**

GU Enrolment No.: **202303104559**

ABC ID: **452419074330**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MER KUSH RAMCHANDRABHAI**

Class: **B. Com. Sem.-6**

Roll No. **166**

GU Enrolment No.: **202303104560**

ABC ID: **670133689287**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MITHAWALA VADIYAN ABDULKARIM**

Class: **B. Com. Sem.-6**

Roll No. **167**

GU Enrolment No.: **202303104562**

ABC ID: **540708479819**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MODI DHARMA MEHULKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **168**

GU Enrolment No.: **202303104563**

ABC ID: **356653829380**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

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Signature of Faculty Mentor: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MODI DHRUV JATINBHAI**

Class: **B. Com. Sem.-6**

Roll No. **169**

GU Enrolment No.: **202303104564**

ABC ID: **202303104564**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MODI VRAJ UMESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **170**

GU Enrolment No.: **202303104565**

ABC ID: **903661272934**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MOHIT PRAVINBHAI BHIMBHA**

Class: **B. Com. Sem.-6**

Roll No. **171**

GU Enrolment No.: **202303104566**

ABC ID: **436554333547**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MOKSHITA HARISH SHAH**

Class: **B. Com. Sem.-6**

Roll No. **172**

GU Enrolment No.: **202303104567**

ABC ID: **283457209941**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Website: www.gbshahcollege.in

Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MOMIN FATEHALI SABIRALI**

Class: **B. Com. Sem.-6**

Roll No. **173**

GU Enrolment No.: **202303104570**

ABC ID: **773461810435**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MOMIN SADAFFATEMA GULAMAKBAR**

Class: **B. Com. Sem.-6**

Roll No. **174**

GU Enrolment No.: **202303104572**

ABC ID: **897985959719**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MULLAMITHAWALA ALIASGAR DAWOODBHAI**

Class: **B. Com. Sem.-6**

Roll No. **175**

GU Enrolment No.: **202303104573**

ABC ID: **650885341558**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MUNIYA MEHUL NARENDRABHAI**

Class: **B. Com. Sem.-6**

Roll No. **176**

GU Enrolment No.: **202303104574**

ABC ID: **820692783253**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MUSDIYA KARTHIKKUMAR ALABHAI**

Class: **B. Com. Sem.-6**

Roll No. **177**

GU Enrolment No.: **202303104575**

ABC ID: **124720400963**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **NAI KRISH LAXMANBHAI**

Class: **B. Com. Sem.-6**

Roll No. **178**

GU Enrolment No.: **202303104576**

ABC ID: **214819589995**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **NANKANI DIYA DIPAKBHAI**

Class: **B. Com. Sem.-6**

Roll No. **179**

GU Enrolment No.: **202303104577**

ABC ID: **555350288981**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **NARIYA HARSHIL SHAILESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **180**

GU Enrolment No.: **202303104578**

ABC ID: **154495649520**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **NARIYA SMIT KISHORBHAI**

Class: **B. Com. Sem.-6**

Roll No. **181**

GU Enrolment No.: **202303104579**

ABC ID: **131427562463**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

G. B. SHAH COMMERCE COLLEGE



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Govt. of Guj. E-Gyan Code: 39

CHE Zone: 91, CHE Code: 42

Uni. Code: 066

Tel. No. +91-79-2660 5232

E-mail: gbcc066@gmail.com

Website: www.gbshahcollege.in

Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **NETRA HARDIKKUMAR HARIBHAI**

Class: **B. Com. Sem.-6**

Roll No. **182**

GU Enrolment No.: **202303104581**

ABC ID: **368189827915**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PAGHADAL AYUSH AJITBHAI**

Class: **B. Com. Sem.-6**

Roll No. **183**

GU Enrolment No.: **202303104583**

ABC ID: **545463714026**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PAL SNEHA SURESHKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **184**

GU Enrolment No.: **202303104584**

ABC ID: **130803534065**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PANCHAL HARDI VIJENDRAKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **185**

GU Enrolment No.: **202303104586**

ABC ID: **360159260112**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PANCHAL JAY KALPESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **186**

GU Enrolment No.: **202303104587**

ABC ID: **667548492668**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PANCHAL KASHISH JAYENDRABHAI**

Class: **B. Com. Sem.-6**

Roll No. **187**

GU Enrolment No.: **202303104588**

ABC ID: **253440988933**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PANCHAL KRISHA VISHNUBHAI**

Class: **B. Com. Sem.-6**

Roll No. **188**

GU Enrolment No.: **202303104589**

ABC ID: **658100445677**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PANCHAL NIMESH RAJESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **189**

GU Enrolment No.: **202303104590**

ABC ID: **508742391767**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PANCHAL RUTU NITINBHAI**

Class: **B. Com. Sem.-6**

Roll No. **190**

GU Enrolment No.: **202303104592**

ABC ID: **268724319216**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PANCHAL SHREYA DILIPBHAI**

Class: **B. Com. Sem.-6**

Roll No. **191**

GU Enrolment No.: **202303104593**

ABC ID: **880048924159**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PANDIT HARIOM ASHUTOSHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **192**

GU Enrolment No.: **202303104595**

ABC ID: **588563432966**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Website: www.gbshahcollege.in

Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PANDYA VYOM HITESHKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **193**

GU Enrolment No.: **202303104597**

ABC ID: **636285190700**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PANSURIYA DARSHITKUMAR CHIMANBHAI**

Class: **B. Com. Sem.-6**

Roll No. **194**

GU Enrolment No.: **202303104598**

ABC ID: **613665966058**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PANSURIYA JEEL PRAFULBHAI**

Class: **B. Com. Sem.-6**

Roll No. **195**

GU Enrolment No.: **202303104599**

ABC ID: **384788844131**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PAREKH RUSHI**

Class: **B. Com. Sem.-6**

Roll No. **196**

GU Enrolment No.: **202303104603**

ABC ID: **828694645068**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PARMAR DHARABEN SURESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **197**

GU Enrolment No.: **202303104604**

ABC ID: **924954658843**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PARMAR HARSH BIPINBHAI**

Class: **B. Com. Sem.-6**

Roll No. **198**

GU Enrolment No.: **202303104609**

ABC ID: **504529054246**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PARMAR HARSHILKUMAR GAUTAMBHAI**

Class: **B. Com. Sem.-6**

Roll No. **199**

GU Enrolment No.: **202303104610**

ABC ID: **292202729716**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PARMAR MAYANK MOHANLAL**

Class: **B. Com. Sem.-6**

Roll No. **200**

GU Enrolment No.: **202303104613**

ABC ID: **710811620527**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PARMAR NIKHILKUMAR MOHANLAL**

Class: **B. Com. Sem.-6**

Roll No. **201**

GU Enrolment No.: **202303104615**

ABC ID: **395569407571**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PARMAR SUMITSINH AHEMDUBHA**

Class: **B. Com. Sem.-6**

Roll No. **202**

GU Enrolment No.: **202303104617**

ABC ID: **928635345709**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PATEL BANSARI PRABHUBHAI**

Class: **B. Com. Sem.-6**

Roll No. **203**

GU Enrolment No.: **202303104622**

ABC ID: **458446824558**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PATEL DEVI UMESHKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **204**

GU Enrolment No.: **202303104623**

ABC ID: **722663180607**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PATEL DHARM VIJAYBHAI**

Class: **B. Com. Sem.-6**

Roll No. **205**

GU Enrolment No.: **202303104624**

ABC ID: **987138962443**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PATEL DHRUMIL MITESHKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **206**

GU Enrolment No.: **202303104625**

ABC ID: **860113679855**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PATEL DHRUVKUMAR SATISHKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **207**

GU Enrolment No.: **202303104626**

ABC ID: **985792466379**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PATEL HARSH SUDHIRBHAI**

Class: **B. Com. Sem.-6**

Roll No. **208**

GU Enrolment No.: **202303104627**

ABC ID: **620534365151**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PATEL HET KIRANKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **209**

GU Enrolment No.: **202303104628**

ABC ID: **811702885872**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **HITARTHI PATEL**

Class: **B. Com. Sem.-6**

Roll No. **210**

GU Enrolment No.: **202303104458**

ABC ID: **805872396234**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PATEL JAYMIN DHARMENDRABHAI**

Class: **B. Com. Sem.-6**

Roll No. **211**

GU Enrolment No.: **202303104630**

ABC ID: **438999411897**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PATEL KRISH KAUSHIKKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **212**

GU Enrolment No.: **202303104631**

ABC ID: **798692535193**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PATEL KRISH PRATIKBHAI**

Class: **B. Com. Sem.-6**

Roll No. **213**

GU Enrolment No.: **202303104632**

ABC ID: **362295801101**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PATEL KRISHA JAYESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **214**

GU Enrolment No.: **202303104633**

ABC ID: **996339217017**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PATEL MANTHAN RAJESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **215**

GU Enrolment No.: **202303104634**

ABC ID: **676827182288**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PATEL MESHWA KRUSHNAKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **216**

GU Enrolment No.: **202303104635**

ABC ID: **625222297129**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PATEL MITTAL ASHOKBHAI**

Class: **B. Com. Sem.-6**

Roll No. **217**

GU Enrolment No.: **202303104636**

ABC ID: **677680885747**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PATEL NEHA CHIRAGBHAI**

Class: **B. Com. Sem.-6**

Roll No. **218**

GU Enrolment No.: **202303104637**

ABC ID: **545385338563**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PATEL PARTH NAVNITBHAI**

Class: **B. Com. Sem.-6**

Roll No. **219**

GU Enrolment No.: **202303104639**

ABC ID: **816799911460**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PATEL RUDRAKSH BHARAT**

Class: **B. Com. Sem.-6**

Roll No. **220**

GU Enrolment No.: **202303104641**

ABC ID: **659327626493**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PATEL SMIT UMESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **221**

GU Enrolment No.: **202303104642**

ABC ID: **797534591584**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Website: www.gbshahcollege.in

Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PATEL TEERTH NIKUNJ**

Class: **B. Com. Sem.-6**

Roll No. **222**

GU Enrolment No.: **202303104643**

ABC ID: **639249813685**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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CHE Zone: 91, CHE Code: 42

Uni. Code: 066

Tel. No. +91-79-2660 5232

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Website: www.gbshahcollege.in

Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PATEL TIRTH HARIKRUSHNBHAI**

Class: **B. Com. Sem.-6**

Roll No. **223**

GU Enrolment No.: **202303104644**

ABC ID: **636480108975**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PATEL VANSI RAJENDRABHAI**

Class: **B. Com. Sem.-6**

Roll No. **224**

GU Enrolment No.: **202303104645**

ABC ID: **889345783382**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PATEL YATRI JASVANTBHAI**

Class: **B. Com. Sem.-6**

Roll No. **225**

GU Enrolment No.: **202303104647**

ABC ID: **139854925674**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PATHAK PARTH JAGDISHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **226**

GU Enrolment No.: **202303104648**

ABC ID: **915286690898**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PATHAN ARSHIYABANU TARIFKHAN**

Class: **B. Com. Sem.-6**

Roll No. **227**

GU Enrolment No.: **202303104649**

ABC ID: **536139421311**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PATHAN BUSHRABANU ABBASKHAN**

Class: **B. Com. Sem.-6**

Roll No. **228**

GU Enrolment No.: **202303104650**

ABC ID: **682787145218**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PATHAN MOHD NIGARKHAN NOORKHAN**

Class: **B. Com. Sem.-6**

Roll No. **229**

GU Enrolment No.: **202303104654**

ABC ID: **527891930827**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PATHAN SUMAIYA MOASRAR**

Class: **B. Com. Sem.-6**

Roll No. **230**

GU Enrolment No.: **202303104657**

ABC ID: **708767463470**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PATIDAR DIPESH LALJIBHAI**

Class: **B. Com. Sem.-6**

Roll No. **231**

GU Enrolment No.: **202303104659**

ABC ID: **619536452825**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PONKIYA RAVI MAGANBHAI**

Class: **B. Com. Sem.-6**

Roll No. **232**

GU Enrolment No.: **202303104663**

ABC ID: **418669090434**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PRAJAPAT LALIT DINESHKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **233**

GU Enrolment No.: **202303104664**

ABC ID: **111586469892**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PRAJAPATI AKASHKUMAR BHARATBHAI**

Class: **B. Com. Sem.-6**

Roll No. **234**

GU Enrolment No.: **202303104665**

ABC ID: **273424082049**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PRAJAPATI ARYAN PRAKASHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **235**

GU Enrolment No.: **202303104667**

ABC ID: **446032650800**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PRAJAPATI ASHOKBHAI RAMESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **236**

GU Enrolment No.: **202303104668**

ABC ID: **990103542520**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PRAJAPATI DHRUV SANJAYKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **237**

GU Enrolment No.: **202303104669**

ABC ID: **408313518929**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PRAJAPATI DIVYA KIRITKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **238**

GU Enrolment No.: **202303104671**

ABC ID: **920831321142**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PRAJAPATI DIYA DEVENDRABHAI**

Class: **B. Com. Sem.-6**

Roll No. **239**

GU Enrolment No.: **202303104672**

ABC ID: **491628349938**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PRAJAPATI GAYATRI HITESH**

Class: **B. Com. Sem.-6**

Roll No. **240**

GU Enrolment No.: **202303104673**

ABC ID: **107094583595**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PRAJAPATI HARISH JAGDISHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **241**

GU Enrolment No.: **202303104674**

ABC ID: **454728495685**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

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Signature of Faculty Mentor: _____

Date: _____

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Website: www.gbshahcollege.in

Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PRAJAPATI HELI MANOJBHAI**

Class: **B. Com. Sem.-6**

Roll No. **242**

GU Enrolment No.: **202303104675**

ABC ID: **320916984780**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Govt. of Guj. E-Gyan Code: 39

CHE Zone: 91, CHE Code: 42

Uni. Code: 066

Tel. No. +91-79-2660 5232

E-mail: gbcc066@gmail.com

Website: www.gbshahcollege.in

Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PRAJAPATI ISHWAR LAXMANBHAI**

Class: **B. Com. Sem.-6**

Roll No. **243**

GU Enrolment No.: **202303104676**

ABC ID: **472300148690**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PRAJAPATI KAVYA MAYANKBHAI**

Class: **B. Com. Sem.-6**

Roll No. **244**

GU Enrolment No.: **202303104678**

ABC ID: **645361580855**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PRAJAPATI MEET BHARATBHAI**

Class: **B. Com. Sem.-6**

Roll No. **245**

GU Enrolment No.: **202303104680**

ABC ID: **931844532321**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PRAJAPATI PRUTHVI HASMUKHKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **246**

GU Enrolment No.: **202303104683**

ABC ID: **836251891483**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PRAJAPATI RAJDEEP DINESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **247**

GU Enrolment No.: **202303104684**

ABC ID: **302121037879**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PRAJAPATI SAHIL BHARATBHAI**

Class: **B. Com. Sem.-6**

Roll No. **248**

GU Enrolment No.: **202303104685**

ABC ID: **862522563222**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PRAJAPATI TIRTH KIRITKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **249**

GU Enrolment No.: **202303104686**

ABC ID: **160222691902**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

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Signature of Faculty Mentor: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PRASAD DISHA MAHENDRAKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **250**

GU Enrolment No.: **202303104687**

ABC ID: **203980353816**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PURABIYA BHUMI BHARATBHAI**

Class: **B. Com. Sem.-6**

Roll No. **251**

GU Enrolment No.: **202303104688**

ABC ID: **560267540418**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PURABIYA ROHANBHAI ARVINDBHAI**

Class: **B. Com. Sem.-6**

Roll No. **252**

GU Enrolment No.: **202303104690**

ABC ID: **109233610146**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **RABARI GAURAV KANJIBHAI**

Class: **B. Com. Sem.-6**

Roll No. **253**

GU Enrolment No.: **202303104694**

ABC ID: **528798469290**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **RADADIYA PRINCE BHARATBHAI**

Class: **B. Com. Sem.-6**

Roll No. **254**

GU Enrolment No.: **202303104698**

ABC ID: **778039927533**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **RAJPUT ANSHU ARUNSINGH**

Class: **B. Com. Sem.-6**

Roll No. **255**

GU Enrolment No.: **202303104701**

ABC ID: **384103202727**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **RAJPUT KRUPA DINESH**

Class: **B. Com. Sem.-6**

Roll No. **256**

GU Enrolment No.: **202303104702**

ABC ID: **993830311223**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **RAJPUT RISHI AMRISH**

Class: **B. Com. Sem.-6**

Roll No. **257**

GU Enrolment No.: **202303104703**

ABC ID: **956074925408**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **RAMANI PRINCE PARESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **258**

GU Enrolment No.: **202303104705**

ABC ID: **593783175610**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **RAMCHANDANI RISHI INDRAKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **259**

GU Enrolment No.: **202303104706**

ABC ID: **797051910289**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **RANA MEET KALPESHKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **260**

GU Enrolment No.: **202303104708**

ABC ID: **236936301451**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **RANA PREM HITESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **261**

GU Enrolment No.: **202303104709**

ABC ID: **435291142185**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **RANA SHAMIYA SIKANDAR**

Class: **B. Com. Sem.-6**

Roll No. **262**

GU Enrolment No.: **202303104710**

ABC ID: **623635045541**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Uni. Code: 066

Tel. No. +91-79-2660 5232

E-mail: gbcc066@gmail.com

Website: www.gbshahcollege.in

Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **RANA ZALAK ROSHANBHAI**

Class: **B. Com. Sem.-6**

Roll No. **263**

GU Enrolment No.: **202303104712**

ABC ID: **735873134400**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **RANGANI SAHIL RAJESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **264**

GU Enrolment No.: **202303104713**

ABC ID: **794884899021**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

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Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **RANGREJ FAHIM FARUKBHAI**

Class: **B. Com. Sem.-6**

Roll No. **265**

GU Enrolment No.: **202303104714**

ABC ID: **734233812627**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **RANK AYUSH VINODBHAI**

Class: **B. Com. Sem.-6**

Roll No. **266**

GU Enrolment No.: **202303104715**

ABC ID: **614622276644**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **RAO DHRUVITA KANDARPKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **267**

GU Enrolment No.: **202303104716**

ABC ID: **171290297898**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **RASHIKA SINGH RATHORE**

Class: **B. Com. Sem.-6**

Roll No. **268**

GU Enrolment No.: **202303104717**

ABC ID: **271123958377**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **RATHOD HARSH MAHENDRABHAI**

Class: **B. Com. Sem.-6**

Roll No. **269**

GU Enrolment No.: **202303104719**

ABC ID: **694029404604**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **HARSH SINGH RAUTELA**

Class: **B. Com. Sem.-6**

Roll No. **270**

GU Enrolment No.: **202303104455**

ABC ID: **253971094897**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **RAVAL DHYANKUMAR RAMESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **271**

GU Enrolment No.: **202303104722**

ABC ID: **815387435022**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **RAVAL MAYUR RAMESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **272**

GU Enrolment No.: **202303104723**

ABC ID: **273644338597**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **RAVAL MEHULKUMAR SHAILESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **273**

GU Enrolment No.: **202303104724**

ABC ID: **657987490352**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **RAVLANI MUSKAN PARESHKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **274**

GU Enrolment No.: **202303104725**

ABC ID: **848184013599**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **RAWAL MANAV PIYUSHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **275**

GU Enrolment No.: **202303104726**

ABC ID: **626942901440**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **RAWAT JITENDRASINGH KAMALSINGH**

Class: **B. Com. Sem.-6**

Roll No. **276**

GU Enrolment No.: **202303104727**

ABC ID: **672683703372**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **RITHIKA KUMMAKAROTH**

Class: **B. Com. Sem.-6**

Roll No. **277**

GU Enrolment No.: **202303104728**

ABC ID: **228821799689**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **ROGHANI PRAKASH RAJENDRAKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **278**

GU Enrolment No.: **202303104729**

ABC ID: **131561754688**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **ROHRA MANAV SUNILKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **279**

GU Enrolment No.: **202303104730**

ABC ID: **475505485082**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **RUCHWANI JAYESH VINOD**

Class: **B. Com. Sem.-6**

Roll No. **280**

GU Enrolment No.: **202303104732**

ABC ID: **339806130022**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

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Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **RUDRA PATEL**

Class: **B. Com. Sem.-6**

Roll No. **281**

GU Enrolment No.: **202303104733**

ABC ID: **847209484084**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **RUPARELIYA MEET BHUPATBHAI**

Class: **B. Com. Sem.-6**

Roll No. **282**

GU Enrolment No.: **202303104734**

ABC ID: **357920146714**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Govt. of Guj. E-Gyan Code: 39

CHE Zone: 91, CHE Code: 42

Uni. Code: 066

Tel. No. +91-79-2660 5232

E-mail: gbcc066@gmail.com

Website: www.gbshahcollege.in

Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SAIYAD FAHIM MOINUDDIN**

Class: **B. Com. Sem.-6**

Roll No. **283**

GU Enrolment No.: **202303104737**

ABC ID: **811330630390**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SAIYED MOHAMMED AASIM MOIZUDDIN**

Class: **B. Com. Sem.-6**

Roll No. **284**

GU Enrolment No.: **202303104739**

ABC ID: **604674066155**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SAIYED FASIHAPARVEEN AFZALHUSAIN**

Class: **B. Com. Sem.-6**

Roll No. **285**

GU Enrolment No.: **202303104738**

ABC ID: **128478385945**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SAKARIYA PRATIK PRAKASHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **286**

GU Enrolment No.: **202303104742**

ABC ID: **844882727119**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SAKHRELIYA BHARGAV JAYESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **287**

GU Enrolment No.: **202303104743**

ABC ID: **694585261828**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MEET SALGIYA**

Class: **B. Com. Sem.-6**

Roll No. **288**

GU Enrolment No.: **202303104547**

ABC ID: **505625472187**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SANGHARIYAT AYAN YUNUSBHAI**

Class: **B. Com. Sem.-6**

Roll No. **289**

GU Enrolment No.: **202303104745**

ABC ID: **631471506405**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SANGHVI MAHI MAULIKBHAI**

Class: **B. Com. Sem.-6**

Roll No. **290**

GU Enrolment No.: **202303104746**

ABC ID: **130773459863**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SARADVA AYUSHI DINESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **291**

GU Enrolment No.: **202303104747**

ABC ID: **920853443522**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SARGARA GAURAV BHARATBHAI**

Class: **B. Com. Sem.-6**

Roll No. **292**

GU Enrolment No.: **202303104748**

ABC ID: **690787981921**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SARVAIYA YASHAVANT GIRISHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **293**

GU Enrolment No.: **202303104750**

ABC ID: **711940244025**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SATHWARA JUGAL NILESHKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **294**

GU Enrolment No.: **202303104751**

ABC ID: **594079067339**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SATVARA HETUL KIRITBHAI**

Class: **B. Com. Sem.-6**

Roll No. **295**

GU Enrolment No.: **202303104752**

ABC ID: **235210468753**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SAVSAVIYA HARSHIL RAMESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **296**

GU Enrolment No.: **202303104753**

ABC ID: **736326992780**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SEVARA MAYANK BHARATBHAI**

Class: **B. Com. Sem.-6**

Roll No. **297**

GU Enrolment No.: **202303104754**

ABC ID: **678221297608**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAH ADITYA NILESHKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **298**

GU Enrolment No.: **202303104755**

ABC ID: **119730001747**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAH AKSHAT SANJAY**

Class: **B. Com. Sem.-6**

Roll No. **299**

GU Enrolment No.: **202303104756**

ABC ID: **896224682686**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAH ARPIT SANJAY**

Class: **B. Com. Sem.-6**

Roll No. **300**

GU Enrolment No.: **202303104757**

ABC ID: **620137210009**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAH AYUSH JITENDRA**

Class: **B. Com. Sem.-6**

Roll No. **301**

GU Enrolment No.: **202303104758**

ABC ID: **867672744543**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAH DEV DEEPAN**

Class: **B. Com. Sem.-6**

Roll No. **302**

GU Enrolment No.: **202303104759**

ABC ID: **635752134923**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Govt. of Guj. E-Gyan Code: 39

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Uni. Code: 066

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E-mail: gbcc066@gmail.com

Website: www.gbshahcollege.in

Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAH HARSHIL RAJENDRAKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **303**

GU Enrolment No.: **202303104760**

ABC ID: **141477515772**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAH HEER BHARTENBHAI**

Class: **B. Com. Sem.-6**

Roll No. **304**

GU Enrolment No.: **202303104761**

ABC ID: **192739800162**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

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Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAH JAINI NITINKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **305**

GU Enrolment No.: **202303104762**

ABC ID: **623158620456**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAH JIMIT BHAVIKBHAI**

Class: **B. Com. Sem.-6**

Roll No. **306**

GU Enrolment No.: **202303104763**

ABC ID: **431014483545**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAH JINANGI PRABHULAL**

Class: **B. Com. Sem.-6**

Roll No. **307**

GU Enrolment No.: **202303104764**

ABC ID: **448652771444**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAH KANCHI HEMANT**

Class: **B. Com. Sem.-6**

Roll No. **308**

GU Enrolment No.: **202303104765**

ABC ID: **497806761859**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAH MAHI DARSHAN**

Class: **B. Com. Sem.-6**

Roll No. **309**

GU Enrolment No.: **202303104766**

ABC ID: **568444733914**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAH MAHIR VIRENBHAI**

Class: **B. Com. Sem.-6**

Roll No. **310**

GU Enrolment No.: **202303104767**

ABC ID: **877572145148**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

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Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAH MANAN GAURAVKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **311**

GU Enrolment No.: **202303104768**

ABC ID: **709823189433**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAH MITANSH HITESHKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **312**

GU Enrolment No.: **202303104769**

ABC ID: **244977565788**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

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Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAH NISARG BHAVIKKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **313**

GU Enrolment No.: **202303104770**

ABC ID: **370255238524**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

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Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAH PARSHWA KINNARKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **314**

GU Enrolment No.: **202303104771**

ABC ID: **805472989479**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAH PAVAN RUPESHKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **315**

GU Enrolment No.: **202303104772**

ABC ID: **299479769261**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAH PRISHA URVISH**

Class: **B. Com. Sem.-6**

Roll No. **316**

GU Enrolment No.: **202303104773**

ABC ID: **443245479712**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAH RAMPRAVESHKUMAR JITENDRA**

Class: **B. Com. Sem.-6**

Roll No. **317**

GU Enrolment No.: **202303104774**

ABC ID: **332117656023**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAH RUDRA SANJAY**

Class: **B. Com. Sem.-6**

Roll No. **318**

GU Enrolment No.: **202303104776**

ABC ID: **314449690309**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAH SAKSHI SAMIRKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **319**

GU Enrolment No.: **202303104777**

ABC ID: **745960206049**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAIKH FATIMABANU IMTIYAZHUSAIN**

Class: **B. Com. Sem.-6**

Roll No. **320**

GU Enrolment No.: **202303104779**

ABC ID: **609122289077**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAIKH IQRA ZAKIRHUSSAIN**

Class: **B. Com. Sem.-6**

Roll No. **321**

GU Enrolment No.: **202303104780**

ABC ID: **435974086530**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAIKH LAJINABIBI KUTBUDDIN**

Class: **B. Com. Sem.-6**

Roll No. **322**

GU Enrolment No.: **202303104781**

ABC ID: **884188334710**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Govt. of Guj. E-Gyan Code: 39

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Uni. Code: 066

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E-mail: gbcc066@gmail.com

Website: www.gbshahcollege.in

Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAIKH MD HUSSAIN MOMUSHTAK**

Class: **B. Com. Sem.-6**

Roll No. **323**

GU Enrolment No.: **202303104782**

ABC ID: **468547803798**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAIKH MOHMMAD ARKAN AJIMUDDIN**

Class: **B. Com. Sem.-6**

Roll No. **324**

GU Enrolment No.: **202303104790**

ABC ID: **431162114430**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAIKH MOHAMMAD TAQI MOHAMMAD SHOAIB**

Class: **B. Com. Sem.-6**

Roll No. **325**

GU Enrolment No.: **202303104783**

ABC ID: **916069169475**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAIKH MOHAMMADUVESH ABDULRASHID**

Class: **B. Com. Sem.-6**

Roll No. **326**

GU Enrolment No.: **202303104785**

ABC ID: **383340090131**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAIKH MOHMMEDSUFIIYAN MOHMMEDSALIM**

Class: **B. Com. Sem.-6**

Roll No. **327**

GU Enrolment No.: **202303104791**

ABC ID: **293999150535**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAIKH MUSKANBANU GULAMALI**

Class: **B. Com. Sem.-6**

Roll No. **328**

GU Enrolment No.: **202303104794**

ABC ID: **404376620935**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAIKH SHAHIDHUSAIN SARFUDDIN**

Class: **B. Com. Sem.-6**

Roll No. **329**

GU Enrolment No.: **202303104796**

ABC ID: **387992823830**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Website: www.gbshahcollege.in

Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAIKH VASIFABANU MAHAMMADYASIN**

Class: **B. Com. Sem.-6**

Roll No. **330**

GU Enrolment No.: **202303104798**

ABC ID: **726921070316**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHARMA GAURAV RAMAVTAR**

Class: **B. Com. Sem.-6**

Roll No. **331**

GU Enrolment No.: **202303104801**

ABC ID: **844536932029**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHARMA SHRIVATHS PAHUL**

Class: **B. Com. Sem.-6**

Roll No. **332**

GU Enrolment No.: **202303104802**

ABC ID: **794107436874**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHARMA SHUBHAMKUMAR SHIVLAL**

Class: **B. Com. Sem.-6**

Roll No. **333**

GU Enrolment No.: **202303104803**

ABC ID: **940007465460**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHARMA TUSHAR SHREERAM**

Class: **B. Com. Sem.-6**

Roll No. **334**

GU Enrolment No.: **202303104804**

ABC ID: **151978438321**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHETH HEMYA NARESH**

Class: **B. Com. Sem.-6**

Roll No. **335**

GU Enrolment No.: **202303104808**

ABC ID: **785442890245**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHETH KRISHA RITESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **336**

GU Enrolment No.: **202303104809**

ABC ID: **507736218466**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHETH PRIYANSHKUMAR GULABCHANDRA**

Class: **B. Com. Sem.-6**

Roll No. **337**

GU Enrolment No.: **202303104810**

ABC ID: **841627028341**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHIROHI PRINCE DENIYAL**

Class: **B. Com. Sem.-6**

Roll No. **338**

GU Enrolment No.: **202303104812**

ABC ID: **295778058408**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHIROYA JAY RAMESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **339**

GU Enrolment No.: **202303104813**

ABC ID: **973885425906**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **ABHISHEK SHUKLA**

Class: **B. Com. Sem.-6**

Roll No. **340**

GU Enrolment No.: **202303104299**

ABC ID: **404174309730**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SIDDIKI MOHAMMAD ADNAN ALTAF HUSAN**

Class: **B. Com. Sem.-6**

Roll No. **341**

GU Enrolment No.: **202303104814**

ABC ID: **337658471917**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SINHA MANSI SUSHIL**

Class: **B. Com. Sem.-6**

Roll No. **342**

GU Enrolment No.: **202303104815**

ABC ID: **696774529378**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Website: www.gbshahcollege.in

Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SIPAI MOHAMMADSAHAD SHABBIRBHAI**

Class: **B. Com. Sem.-6**

Roll No. **343**

GU Enrolment No.: **202303104816**

ABC ID: **546297430878**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SIRIYA MOHIT MAHESHKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **344**

GU Enrolment No.: **202303104818**

ABC ID: **815097756757**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SISODIYA UNNATI DURAKSINH**

Class: **B. Com. Sem.-6**

Roll No. **345**

GU Enrolment No.: **202303104820**

ABC ID: **924951031458**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SOJITRA DHRUV NITINBHAI**

Class: **B. Com. Sem.-6**

Roll No. **346**

GU Enrolment No.: **202303104821**

ABC ID: **546339871060**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SOLANKI DHRUVIBEN GAUTAMBHAI**

Class: **B. Com. Sem.-6**

Roll No. **347**

GU Enrolment No.: **202303104825**

ABC ID: **985286322323**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SOLANKI JAYDEEP GOVINDBHAI**

Class: **B. Com. Sem.-6**

Roll No. **348**

GU Enrolment No.: **202303104826**

ABC ID: **204991982545**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SOLANKI PRATHAM BHUPENDRABHAI**

Class: **B. Com. Sem.-6**

Roll No. **349**

GU Enrolment No.: **202303104828**

ABC ID: **621668039842**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SOLANKI PRATIKSINH JAYDIPSINH**

Class: **B. Com. Sem.-6**

Roll No. **350**

GU Enrolment No.: **202303104829**

ABC ID: **524701309522**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SOLANKI ROHAN SHAILESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **351**

GU Enrolment No.: **202303104831**

ABC ID: **896071625828**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SOMANI JEEL MUKESH**

Class: **B. Com. Sem.-6**

Roll No. **352**

GU Enrolment No.: **202303104834**

ABC ID: **955014462955**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **ISHA SONI**

Class: **B. Com. Sem.-6**

Roll No. **353**

GU Enrolment No.: **202303104459**

ABC ID: **637673471135**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SONI KHUSHI VIMALKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **354**

GU Enrolment No.: **202303104835**

ABC ID: **739140559887**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SUKHWANI JATIN NANA KRAM**

Class: **B. Com. Sem.-6**

Roll No. **355**

GU Enrolment No.: **202303104836**

ABC ID: **378582012198**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SUMBHANIYA SAHIL MAHMADHUSEN**

Class: **B. Com. Sem.-6**

Roll No. **356**

GU Enrolment No.: **202303104837**

ABC ID: **396721794476**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SUMNANI CHIRAG HARESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **357**

GU Enrolment No.: **202303104838**

ABC ID: **687727366403**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SUMNANI GAURANG VIJAYKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **358**

GU Enrolment No.: **202303104839**

ABC ID: **387632759431**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SURAKSHA JAIN**

Class: **B. Com. Sem.-6**

Roll No. **359**

GU Enrolment No.: **202303104840**

ABC ID: **716094840875**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SURTI KAVYA RAJEN**

Class: **B. Com. Sem.-6**

Roll No. **360**

GU Enrolment No.: **202303104841**

ABC ID: **669414514432**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SUTHAR BHAVY HARESHKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **361**

GU Enrolment No.: **202303104843**

ABC ID: **741151796164**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SUTHAR HARSHVARDHAN MUKESHKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **362**

GU Enrolment No.: **202303104844**

ABC ID: **325285696991**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Uni. Code: 066

Tel. No. +91-79-2660 5232

E-mail: gbcc066@gmail.com

Website: www.gbshahcollege.in

Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SUTHAR KARAN ASHOKBHAI**

Class: **B. Com. Sem.-6**

Roll No. **363**

GU Enrolment No.: **202303112864**

ABC ID: **976603155698**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SUTHAR SNEHI UPENDRABHAI**

Class: **B. Com. Sem.-6**

Roll No. **364**

GU Enrolment No.: **202303112866**

ABC ID: **504215891557**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **TAI MOHAMMAD SAYAN ASFAKHUSEN**

Class: **B. Com. Sem.-6**

Roll No. **365**

GU Enrolment No.: **202303104845**

ABC ID: **404968651788**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **TALAVIYA RENIL RAMESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **366**

GU Enrolment No.: **202303104846**

ABC ID: **546138241252**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **TANDEL DEV JIGNESH**

Class: **B. Com. Sem.-6**

Roll No. **367**

GU Enrolment No.: **202303104847**

ABC ID: **437710299912**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **THACKER HINAL KAMLESH**

Class: **B. Com. Sem.-6**

Roll No. **368**

GU Enrolment No.: **202303104848**

ABC ID: **768462926841**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **THACKER PRIYANK HETALKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **369**

GU Enrolment No.: **202303104849**

ABC ID: **930641961458**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **THAKKAR HETANSHI GIRISH**

Class: **B. Com. Sem.-6**

Roll No. **370**

GU Enrolment No.: **202303104850**

ABC ID: **557675588701**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **THAKKAR RAJKUMAR UMAKANT**

Class: **B. Com. Sem.-6**

Roll No. **371**

GU Enrolment No.: **202303104851**

ABC ID: **564490358000**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **THAKKAR SATISH RAMESHCHANDRA**

Class: **B. Com. Sem.-6**

Roll No. **372**

GU Enrolment No.: **202303104852**

ABC ID: **599343527265**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **THAKOR KARAN MANOJBHAI**

Class: **B. Com. Sem.-6**

Roll No. **373**

GU Enrolment No.: **202303104859**

ABC ID: **970645102321**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **THAKOR KARTVYA ARVINDBHAI**

Class: **B. Com. Sem.-6**

Roll No. **374**

GU Enrolment No.: **202303104860**

ABC ID: **347158970352**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **THAKOR MAHESH BABURAM**

Class: **B. Com. Sem.-6**

Roll No. **375**

GU Enrolment No.: **202303104861**

ABC ID: **421031849668**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **THAKOR PINKALBEN CHANDUBHAI**

Class: **B. Com. Sem.-6**

Roll No. **376**

GU Enrolment No.: **202303104863**

ABC ID: **393670080215**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **THAKOR URVASHI DINESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **377**

GU Enrolment No.: **202303104867**

ABC ID: **804901316975**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **THAKUR VRAJ MANGALSINH**

Class: **B. Com. Sem.-6**

Roll No. **378**

GU Enrolment No.: **202303104868**

ABC ID: **273963299427**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **NIKITA THOLIYA**

Class: **B. Com. Sem.-6**

Roll No. **379**

GU Enrolment No.: **202303104582**

ABC ID: **115785202466**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **TIRGAR VANITA RAJMALBHAI**

Class: **B. Com. Sem.-6**

Roll No. **380**

GU Enrolment No.: **202303104869**

ABC ID: **820317303866**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **TREVADIYA PRAGATI ATULBHAI**

Class: **B. Com. Sem.-6**

Roll No. **381**

GU Enrolment No.: **202303104870**

ABC ID: **445858929144**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **TRIPATHI SOHAM TUSHARBHAI**

Class: **B. Com. Sem.-6**

Roll No. **382**

GU Enrolment No.: **202303104871**

ABC ID: **307172963067**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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CHE Zone: 91, CHE Code: 42

Uni. Code: 066

Tel. No. +91-79-2660 5232

E-mail: gbcc066@gmail.com

Website: www.gbshahcollege.in

Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **UMANGBHAI ZALARIYA**

Class: **B. Com. Sem.-6**

Roll No. **383**

GU Enrolment No.: **202303117746**

ABC ID: **427162147794**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Website: www.gbshahcollege.in

Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **UMARETIYA MITESH RAMESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **384**

GU Enrolment No.: **202303104873**

ABC ID: **363339471861**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **UNDHAD KEVAL BHUPATBHAI**

Class: **B. Com. Sem.-6**

Roll No. **385**

GU Enrolment No.: **202303104874**

ABC ID: **754855688194**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **UPADHYAY DIRGHAYU RAMESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **386**

GU Enrolment No.: **202303104875**

ABC ID: **120261839566**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **VADODARIYA VAIBHAV SHAILESHKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **387**

GU Enrolment No.: **202303104877**

ABC ID: **600552807791**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **VAGHANI DILAN GOVIND**

Class: **B. Com. Sem.-6**

Roll No. **388**

GU Enrolment No.: **202303104878**

ABC ID: **468145234920**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **VAGHASIYA KEVAL VIMALBHAI**

Class: **B. Com. Sem.-6**

Roll No. **389**

GU Enrolment No.: **202303104879**

ABC ID: **322072584244**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **VAGHELA MAHESHBHAI RAMESHJI**

Class: **B. Com. Sem.-6**

Roll No. **390**

GU Enrolment No.: **202303104882**

ABC ID: **754578301933**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **VAGHELA MANAVSINH JITENDRASINH**

Class: **B. Com. Sem.-6**

Roll No. **391**

GU Enrolment No.: **202303104883**

ABC ID: **781346489448**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **VAJA AARTI NATVARLAL**

Class: **B. Com. Sem.-6**

Roll No. **392**

GU Enrolment No.: **202303104888**

ABC ID: **831442905516**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **VALAND URVASHIBEN KANUBHAI**

Class: **B. Com. Sem.-6**

Roll No. **393**

GU Enrolment No.: **202303104889**

ABC ID: **897459847528**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **VANDAN NILESHBHAI DOSHI**

Class: **B. Com. Sem.-6**

Roll No. **394**

GU Enrolment No.: **202303104891**

ABC ID: **460299282804**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **VANDIT CHATURBHAI CHOVIYA**

Class: **B. Com. Sem.-6**

Roll No. **395**

GU Enrolment No.: **202303104892**

ABC ID: **733834229913**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **VANDRA KRUPESH KAMLESH**

Class: **B. Com. Sem.-6**

Roll No. **396**

GU Enrolment No.: **202303104893**

ABC ID: **130906582519**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **VANOL NIKITA ARVINDBHAI**

Class: **B. Com. Sem.-6**

Roll No. **397**

GU Enrolment No.: **202303104896**

ABC ID: **454099610302**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **VANRA NISHITA HARSHADKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **398**

GU Enrolment No.: **202303104897**

ABC ID: **166323833256**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **VARSANI YASHMI KHIMJI**

Class: **B. Com. Sem.-6**

Roll No. **399**

GU Enrolment No.: **202303104902**

ABC ID: **623642190520**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **VASOYA DARSHIL ASHOKBHAI**

Class: **B. Com. Sem.-6**

Roll No. **400**

GU Enrolment No.: **202303104903**

ABC ID: **253388928338**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **VEKARIYA HARSHAD PRAVINBHAI**

Class: **B. Com. Sem.-6**

Roll No. **401**

GU Enrolment No.: **202303104907**

ABC ID: **437417660809**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **VIDJA UDAY HASMUKHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **402**

GU Enrolment No.: **202303104908**

ABC ID: **747327501626**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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E-mail: gbcc066@gmail.com

Website: www.gbshahcollege.in

Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **VIRANI MAHEJBIN RAJAK ALI**

Class: **B. Com. Sem.-6**

Roll No. **403**

GU Enrolment No.: **202303104910**

ABC ID: **474532060822**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

G. B. SHAH COMMERCE COLLEGE



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Govt. of Guj. E-Gyan Code: 39

CHE Zone: 91, CHE Code: 42

Uni. Code: 066

Tel. No. +91-79-2660 5232

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Website: www.gbshahcollege.in

Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **VIRANI RONAK PRAVINBHAI**

Class: **B. Com. Sem.-6**

Roll No. **404**

GU Enrolment No.: **202303104911**

ABC ID: **829846668860**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **VISHWAKARMA VIJAY JAGDISHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **405**

GU Enrolment No.: **202303104913**

ABC ID: **775282360006**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **VORA ARTI DHARMENDRABHAI**

Class: **B. Com. Sem.-6**

Roll No. **406**

GU Enrolment No.: **202303104914**

ABC ID: **169163527860**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **VORA JAYMIN KANTILAL**

Class: **B. Com. Sem.-6**

Roll No. **407**

GU Enrolment No.: **202303104915**

ABC ID: **908079377840**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **VORA PUNYA HARESH**

Class: **B. Com. Sem.-6**

Roll No. **408**

GU Enrolment No.: **202303104916**

ABC ID: **580629240996**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **YADAV ANISH RANJITKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **409**

GU Enrolment No.: **202303104918**

ABC ID: **426503459759**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **YADAV HARSH MANOJBHAI**

Class: **B. Com. Sem.-6**

Roll No. **410**

GU Enrolment No.: **202303104919**

ABC ID: **504438215556**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **YADAV ROSHANI BHOLANATH**

Class: **B. Com. Sem.-6**

Roll No. **411**

GU Enrolment No.: **202303104921**

ABC ID: **464704059634**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **Z VIVEKKUMAR SUSHILKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **412**

GU Enrolment No.: **202303104925**

ABC ID: **965482884212**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **ZALA YASHRAJSINH LAKHDIRSINH**

Class: **B. Com. Sem.-6**

Roll No. **413**

GU Enrolment No.: **202303104927**

ABC ID: **604650084178**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **KATHIRIYA DHRUVIL SANJAYBHAI**

Class: **B. Com. Sem.-6**

Roll No. **414**

GU Enrolment No.: **202303112472**

ABC ID: **510006983666**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **RATHOUR KRUTI NAGENDRASINGH**

Class: **B. Com. Sem.-6**

Roll No. **415**

GU Enrolment No.: **202303107260**

ABC ID: **462419300714**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAH DEEPAL PIYUSH**

Class: **B. Com. Sem.-6**

Roll No. **416**

GU Enrolment No.: **202303112804**

ABC ID: **889902815865**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **KOLIPATEL BHAVESH CHANDUBHAI**

Class: **B. Com. Sem.-6**

Roll No. **417**

GU Enrolment No.: **202303104500**

ABC ID:

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SEN LUCKY SHRI DINESH**

Class: **B. Com. Sem.-6**

Roll No. **418**

GU Enrolment No.: **202303121688**

ABC ID:

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **VEJANI PARTH ARVINDBHAI**

Class: **B. Com. Sem.-6**

Roll No. **419**

GU Enrolment No.: **202303104906**

ABC ID:

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **ASODIYA VINOD HARGOVINDBHAI**

Class: **B. Com. Sem.-6**

Roll No. **451**

GU Enrolment No.: **202303104314**

ABC ID: **100909683336**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **BHIL KHODALBEN MANOJBHAI**

Class: **B. Com. Sem.-6**

Roll No. **452**

GU Enrolment No.: **202303104341**

ABC ID: **615462014187**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **BHUV PRINCE SANJAYBHAI**

Class: **B. Com. Sem.-6**

Roll No. **453**

GU Enrolment No.: **202303104346**

ABC ID: **542249480548**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **CHAUDHARI DHRUV VIRENDRABHAI**

Class: **B. Com. Sem.-6**

Roll No. **454**

GU Enrolment No.: **202303104353**

ABC ID: **564158462052**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Govt. of Guj. E-Gyan Code: 39

CHE Zone: 91, CHE Code: 42

Uni. Code: 066

Tel. No. +91-79-2660 5232

E-mail: gbcc066@gmail.com

Website: www.gbshahcollege.in

Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **CHAUHAN AARATIBEN ROHITBHAI**

Class: **B. Com. Sem.-6**

Roll No. **455**

GU Enrolment No.: **202303104357**

ABC ID: **320443394043**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

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Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **CHAUHAN CHETAN JITUBHAI**

Class: **B. Com. Sem.-6**

Roll No. **456**

GU Enrolment No.: **202303104359**

ABC ID: **589306576230**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **CHAUHAN JAYVEERSINH HARSHADSINH**

Class: **B. Com. Sem.-6**

Roll No. **457**

GU Enrolment No.: **202303104367**

ABC ID: **852065120412**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **CHAUHAN RINKU RAJUBHAI**

Class: **B. Com. Sem.-6**

Roll No. **458**

GU Enrolment No.: **202303104372**

ABC ID: **155266896831**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **CHAVADA ANITABEN SANJAYBHAI**

Class: **B. Com. Sem.-6**

Roll No. **459**

GU Enrolment No.: **202303104374**

ABC ID: **624099439467**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **CHAVDA BHAVIN JITENDRAKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **460**

GU Enrolment No.: **202303104375**

ABC ID: **573121932602**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **CHAVDA HARDIK KAMLESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **461**

GU Enrolment No.: **202303104376**

ABC ID: **394964753500**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **CHUNARA KIRANBHAI KISHORBHAI**

Class: **B. Com. Sem.-6**

Roll No. **462**

GU Enrolment No.: **202303104382**

ABC ID: **364234082849**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **CHUNARA MANISHBHAI DINESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **463**

GU Enrolment No.: **202303104383**

ABC ID: **714940237164**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **DAFDA AARTI MUKESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **464**

GU Enrolment No.: **202303104387**

ABC ID: **258591428662**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

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Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **DAFDA ARYAN ASHOKBHAI**

Class: **B. Com. Sem.-6**

Roll No. **465**

GU Enrolment No.: **202303104388**

ABC ID: **191710810362**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **DAMOR MINABEN AKHAMBHAI**

Class: **B. Com. Sem.-6**

Roll No. **466**

GU Enrolment No.: **202303104390**

ABC ID: **186227604380**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **DANTANI PREM BHANUBHAI**

Class: **B. Com. Sem.-6**

Roll No. **467**

GU Enrolment No.: **202303104392**

ABC ID: **749046272810**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **DARJI DIVYA JAYANTILAL**

Class: **B. Com. Sem.-6**

Roll No. **468**

GU Enrolment No.: **202303104393**

ABC ID: **790227572370**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **DARJI PREET HASMUKHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **469**

GU Enrolment No.: **202303104395**

ABC ID: **177766080923**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **DESAI ALKESH JASUBHAI**

Class: **B. Com. Sem.-6**

Roll No. **470**

GU Enrolment No.: **202303104398**

ABC ID: **653964888599**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **DESAI JIMIT GEMARBHAI**

Class: **B. Com. Sem.-6**

Roll No. **471**

GU Enrolment No.: **202303104400**

ABC ID: **969966878380**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **DESAI KRISH KANUBHAI**

Class: **B. Com. Sem.-6**

Roll No. **472**

GU Enrolment No.: **202303104401**

ABC ID: **906497093129**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

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Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **DESAI VIDHI VISHNUBHAI**

Class: **B. Com. Sem.-6**

Roll No. **473**

GU Enrolment No.: **202303104406**

ABC ID: **942538771645**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

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Signature of Faculty Mentor: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **DIYODARA MANISH KANUBHAI**

Class: **B. Com. Sem.-6**

Roll No. **474**

GU Enrolment No.: **202303104410**

ABC ID: **270302651758**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Govt. of Guj. E-Gyan Code: 39

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Uni. Code: 066

Tel. No. +91-79-2660 5232

E-mail: gbcc066@gmail.com

Website: www.gbshahcollege.in

Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **DOBARIYA HARAKESH MAHESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **475**

GU Enrolment No.: **202303104411**

ABC ID: **775942213896**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **DODIYA DARSHANBHAI DHANARAJBHAI**

Class: **B. Com. Sem.-6**

Roll No. **476**

GU Enrolment No.: **202303104416**

ABC ID: **649659869088**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **GHANCHI RAHIL ISABHAI**

Class: **B. Com. Sem.-6**

Roll No. **477**

GU Enrolment No.: **202303104430**

ABC ID: **931407576547**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **GOLANI PRIYANSHI MAHESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **478**

GU Enrolment No.: **202303104446**

ABC ID: **896493181905**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **JADAV YASHPALSINH VIJAYSINH**

Class: **B. Com. Sem.-6**

Roll No. **479**

GU Enrolment No.: **202303104460**

ABC ID: **379600018970**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **JANI DHRUVI GHANSHYAMBHAI**

Class: **B. Com. Sem.-6**

Roll No. **480**

GU Enrolment No.: **202303104467**

ABC ID: **642057078356**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **KANAMIYA ABDULMANNAN MAHAMMADMUNAF**

Class: **B. Com. Sem.-6**

Roll No. **481**

GU Enrolment No.: **202303104480**

ABC ID: **683681663592**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

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Signature of Faculty Mentor: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **KHATIK VIVEK BABUBHAI**

Class: **B. Com. Sem.-6**

Roll No. **482**

GU Enrolment No.: **202303104494**

ABC ID: **611156775889**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **KHUNGALA KRUNAL SUBHASHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **483**

GU Enrolment No.: **202303104497**

ABC ID: **240946647140**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **KIKANI NIRAV DINESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **484**

GU Enrolment No.: **202303104499**

ABC ID: **255598052868**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **KOTAK SHRUTI ASHVINBHAI**

Class: **B. Com. Sem.-6**

Roll No. **485**

GU Enrolment No.: **202303104504**

ABC ID: **680199540582**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **KUMAWAT TINA LAXMANBHAI**

Class: **B. Com. Sem.-6**

Roll No. **486**

GU Enrolment No.: **202303104509**

ABC ID: **760599963947**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **LAKHANI FARID MUSTUFABHAI**

Class: **B. Com. Sem.-6**

Roll No. **487**

GU Enrolment No.: **202303104511**

ABC ID: **222296978443**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **LAKHANI FEJAN MUSTUFABHAI**

Class: **B. Com. Sem.-6**

Roll No. **488**

GU Enrolment No.: **202303104512**

ABC ID: **850574660895**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MALEK MOHAMMADUMAM JAKIRHUSSAIN**

Class: **B. Com. Sem.-6**

Roll No. **489**

GU Enrolment No.: **202303104531**

ABC ID: **511895075838**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MANSURI SHAHNAVAZ MOSHAHID**

Class: **B. Com. Sem.-6**

Roll No. **490**

GU Enrolment No.: **202303104542**

ABC ID: **792025709001**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MASANI PRADIPSINH BHARATBHAI**

Class: **B. Com. Sem.-6**

Roll No. **491**

GU Enrolment No.: **202303104545**

ABC ID: **498835240503**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

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Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MOLADIYA RAHUL PRAKASHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **492**

GU Enrolment No.: **202303104568**

ABC ID: **148232907826**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MOMIN AHESANALI ABBASALI**

Class: **B. Com. Sem.-6**

Roll No. **493**

GU Enrolment No.: **202303104569**

ABC ID: **581085030498**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

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Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **MOMIN JUVERIYABANU MOHAMMED YAKUB**

Class: **B. Com. Sem.-6**

Roll No. **494**

GU Enrolment No.: **202303104571**

ABC ID: **576112919236**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Uni. Code: 066

Tel. No. +91-79-2660 5232

E-mail: gbcc066@gmail.com

Website: www.gbshahcollege.in

Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **NAYAK PRIYANKA MAHESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **495**

GU Enrolment No.: **202303104580**

ABC ID: **323556227892**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PANARA MAHAMMAD SADIK SABIRHUSEN**

Class: **B. Com. Sem.-6**

Roll No. **496**

GU Enrolment No.: **202303104585**

ABC ID: **992078684424**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PANDEY PAVANKUMAR ARVIND**

Class: **B. Com. Sem.-6**

Roll No. **497**

GU Enrolment No.: **202303104594**

ABC ID: **932002013179**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PARMAR DHRUVESHKUMAR GIRISHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **498**

GU Enrolment No.: **202303104605**

ABC ID: **365433706515**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PARMAR DIVYARAJ SINH UDESANG**

Class: **B. Com. Sem.-6**

Roll No. **499**

GU Enrolment No.: **202303104606**

ABC ID: **556063453571**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PARMAR DIXITABEN KESHAVBHAI**

Class: **B. Com. Sem.-6**

Roll No. **500**

GU Enrolment No.: **202303104607**

ABC ID: **903171903294**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PARMAR JIGARKUMAR JAYANTIBHAI**

Class: **B. Com. Sem.-6**

Roll No. **501**

GU Enrolment No.: **202303104611**

ABC ID: **771736744697**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

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Signature of Faculty Mentor: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PARMAR KIRANKUMAR MAHESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **502**

GU Enrolment No.: **202303104612**

ABC ID: **465373327966**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PARMAR SUJAL LAXMANBHAI**

Class: **B. Com. Sem.-6**

Roll No. **503**

GU Enrolment No.: **202303104616**

ABC ID: **784442994654**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PARMAR SUZAIN KALPESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **504**

GU Enrolment No.: **202303104618**

ABC ID: **803098238489**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PARMAR VIBHA KALRAVBHAI**

Class: **B. Com. Sem.-6**

Roll No. **505**

GU Enrolment No.: **202303104619**

ABC ID: **725911639831**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PARMAR YOGINIBEN JAGDISHCHANDRA**

Class: **B. Com. Sem.-6**

Roll No. **506**

GU Enrolment No.: **202303104620**

ABC ID: **867724568120**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PASI VINOD CHANDRAKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **507**

GU Enrolment No.: **202303104621**

ABC ID: **358943880207**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PATEL NILESH MUKESHKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **508**

GU Enrolment No.: **202303104638**

ABC ID: **939185217558**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PATEL YASHKUMAR ANUPBHAI**

Class: **B. Com. Sem.-6**

Roll No. **509**

GU Enrolment No.: **202303104646**

ABC ID: **242559905054**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PATHAN FARHANKHAN AKBARKHAN**

Class: **B. Com. Sem.-6**

Roll No. **510**

GU Enrolment No.: **202303104651**

ABC ID: **254851189036**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PATHAN MOHAMMAD SAZEBKHAN LIYAKATKHAN**

Class: **B. Com. Sem.-6**

Roll No. **511**

GU Enrolment No.: **202303104653**

ABC ID: **905565749489**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PATHAN SANIYA SAMIRBHAI**

Class: **B. Com. Sem.-6**

Roll No. **512**

GU Enrolment No.: **202303104656**

ABC ID: **793656301639**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PINJARA TEJEEMA BANU NASHRUDDIN**

Class: **B. Com. Sem.-6**

Roll No. **513**

GU Enrolment No.: **202303104660**

ABC ID: **984010201544**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PIRZADA ABDULLAH ABDUL RAHIM**

Class: **B. Com. Sem.-6**

Roll No. **514**

GU Enrolment No.: **202303104662**

ABC ID: **588735335942**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Govt. of Guj. E-Gyan Code: 39

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Uni. Code: 066

Tel. No. +91-79-2660 5232

E-mail: gbcc066@gmail.com

Website: www.gbshahcollege.in

Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PRAJAPATI DHURVALKUMAR NIKESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **515**

GU Enrolment No.: **202303104670**

ABC ID: **287921981263**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PRAJAPATI IYABEN BHIMJIBHAI**

Class: **B. Com. Sem.-6**

Roll No. **516**

GU Enrolment No.: **202303104677**

ABC ID: **488731931084**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PRAJAPATI MOHAN RAMESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **517**

GU Enrolment No.: **202303104681**

ABC ID: **846729727999**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **PRAJAPATI PRACHI MANOJBHAI**

Class: **B. Com. Sem.-6**

Roll No. **518**

GU Enrolment No.: **202303104682**

ABC ID: **752545963166**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **RABARI GOPAL**

Class: **B. Com. Sem.-6**

Roll No. **519**

GU Enrolment No.: **202303104695**

ABC ID: **557953461801**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **RABARI VIVEK MANUBHAI**

Class: **B. Com. Sem.-6**

Roll No. **520**

GU Enrolment No.: **202303104697**

ABC ID: **145234507722**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **RAMI MANOJKUMAR DINESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **521**

GU Enrolment No.: **202303104707**

ABC ID: **402722777431**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **RANA VINAY PRAKASHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **522**

GU Enrolment No.: **202303104711**

ABC ID: **341542357015**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **RATHOD NAYANKUMAR MANOJKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **523**

GU Enrolment No.: **202303104721**

ABC ID: **483773153321**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **ROSHNIWALA MOHAMMAD SAAD MOHAMMAD ASIF**

Class: **B. Com. Sem.-6**

Roll No. **524**

GU Enrolment No.: **202303104731**

ABC ID: **694553439706**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SADHU AASHUTOSH LAXMANPRASAD**

Class: **B. Com. Sem.-6**

Roll No. **525**

GU Enrolment No.: **202303104735**

ABC ID: **739913531864**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SADHU JAY CHETANBHAI**

Class: **B. Com. Sem.-6**

Roll No. **526**

GU Enrolment No.: **202303104736**

ABC ID: **880659392019**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SAIYED NADIMALI NAJIRALI**

Class: **B. Com. Sem.-6**

Roll No. **527**

GU Enrolment No.: **202303104740**

ABC ID: **584017059655**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SAIYED SUFIYANAKHTAR JAVIDBHAI**

Class: **B. Com. Sem.-6**

Roll No. **528**

GU Enrolment No.: **202303104741**

ABC ID: **808208889937**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SALAT MAYUR SHANKARBHAI**

Class: **B. Com. Sem.-6**

Roll No. **529**

GU Enrolment No.: **202303104744**

ABC ID: **485887627648**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAIKH ALFAIS MUSTAKIMBHAI**

Class: **B. Com. Sem.-6**

Roll No. **530**

GU Enrolment No.: **202303104778**

ABC ID: **770783683438**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAIKH MOHAMMADAYAN HAMIDAHMAD**

Class: **B. Com. Sem.-6**

Roll No. **531**

GU Enrolment No.: **202303104784**

ABC ID: **497175785855**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAIKH MOHAMMADYASIN MONAUSHAD**

Class: **B. Com. Sem.-6**

Roll No. **532**

GU Enrolment No.: **202303104786**

ABC ID: **712982205777**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

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Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAIKH MOHAMMED IRFAN ABDULKALAM**

Class: **B. Com. Sem.-6**

Roll No. **533**

GU Enrolment No.: **202303104787**

ABC ID: **603376259589**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAIKH MOHAMMED MARUF MUNVVAR HUSEN**

Class: **B. Com. Sem.-6**

Roll No. **534**

GU Enrolment No.: **202303104788**

ABC ID: **612202031930**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



G. B. SHAH COMMERCE COLLEGE

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Govt. of Guj. E-Gyan Code: 39

CHE Zone: 91, CHE Code: 42

Uni. Code: 066

Tel. No. +91-79-2660 5232

E-mail: gbcc066@gmail.com

Website: www.gbshahcollege.in

Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAIKH MOHAMMED UZEF MAHAMMED RAFIK**

Class: **B. Com. Sem.-6**

Roll No. **535**

GU Enrolment No.: **202303104789**

ABC ID: **726488500385**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAIKH MOTAHUR RUKNUDDIN**

Class: **B. Com. Sem.-6**

Roll No. **536**

GU Enrolment No.: **202303104792**

ABC ID: **702265990183**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAIKH MUHAMMAD MUSEB AMIRUDDIN**

Class: **B. Com. Sem.-6**

Roll No. **537**

GU Enrolment No.: **202303104793**

ABC ID: **636731425729**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAIKH SHABABANU MOIMRAN**

Class: **B. Com. Sem.-6**

Roll No. **538**

GU Enrolment No.: **202303104795**

ABC ID: **912485349791**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAIKHSIPAI SHAIKHSIPAI AZIM HUSEN**

Class: **B. Com. Sem.-6**

Roll No. **539**

GU Enrolment No.: **202303104799**

ABC ID: **460912532093**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHAKYA JAYESHBHAI RADHAKISHAN**

Class: **B. Com. Sem.-6**

Roll No. **540**

GU Enrolment No.: **202303104800**

ABC ID: **174485872046**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHEIKH AAKIB MAKSUDBHAI**

Class: **B. Com. Sem.-6**

Roll No. **541**

GU Enrolment No.: **202303104805**

ABC ID: **433544854394**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHEKH ARMAN MAKSUDBHAI**

Class: **B. Com. Sem.-6**

Roll No. **542**

GU Enrolment No.: **202303104806**

ABC ID: **175546229519**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SHEKH FAIZAN MAHEBUBBHAI**

Class: **B. Com. Sem.-6**

Roll No. **543**

GU Enrolment No.: **202303104807**

ABC ID: **537968518479**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SOLANKI ASHISHKUMAR VINODCHANDRA**

Class: **B. Com. Sem.-6**

Roll No. **544**

GU Enrolment No.: **202303104824**

ABC ID: **734931628517**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SOLANKI PARTH GAURANGKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **545**

GU Enrolment No.: **202303104827**

ABC ID: **856407837953**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SOLANKI PRIYANSH NARENDRAKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **546**

GU Enrolment No.: **202303104830**

ABC ID: **341489792269**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **SOLANKI RUTVA DINESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **547**

GU Enrolment No.: **202303104832**

ABC ID: **365110931998**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **THAKOR BABARIK CHINUJI**

Class: **B. Com. Sem.-6**

Roll No. **548**

GU Enrolment No.: **202303104853**

ABC ID: **663646157457**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **THAKOR DHAVALKUMAR BHIKHABHAI**

Class: **B. Com. Sem.-6**

Roll No. **549**

GU Enrolment No.: **202303104854**

ABC ID: **865810536996**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **THAKOR HARSHKUMAR RAJESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **550**

GU Enrolment No.: **202303104855**

ABC ID: **430438378736**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **THAKOR JAY SURESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **551**

GU Enrolment No.: **202303104856**

ABC ID: **731665092415**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **THAKOR KARAN DILIPBHAI**

Class: **B. Com. Sem.-6**

Roll No. **552**

GU Enrolment No.: **202303104857**

ABC ID: **274973610079**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **THAKOR KARAN MANISHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **553**

GU Enrolment No.: **202303104858**

ABC ID: **470878938628**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **THAKOR PRAVINKUMAR JAYANTIJI**

Class: **B. Com. Sem.-6**

Roll No. **554**

GU Enrolment No.: **202303104864**

ABC ID: **833240423633**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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(Recognized by UGC with 2(f) & 12(B) and Affiliated with Gujarat University)

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Govt. of Guj. E-Gyan Code: 39

CHE Zone: 91, CHE Code: 42

Uni. Code: 066

Tel. No. +91-79-2660 5232

E-mail: gbcc066@gmail.com

Website: www.gbshahcollege.in

Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **THAKOR SAMIR JAKSIBHAI**

Class: **B. Com. Sem.-6**

Roll No. **555**

GU Enrolment No.: **202303104865**

ABC ID: **164749823481**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **THAKOR SHRUSHTI DIPAKKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **556**

GU Enrolment No.: **202303104866**

ABC ID: **735115538260**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **UPADHYAY SUJAL HARESHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **557**

GU Enrolment No.: **202303104876**

ABC ID: **969167755908**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **VAGHELA JAYDATTSINH BHARATSINH**

Class: **B. Com. Sem.-6**

Roll No. **558**

GU Enrolment No.: **202303104880**

ABC ID: **670035705068**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **VAGHELA KULDEEP HARISHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **559**

GU Enrolment No.: **202303104881**

ABC ID: **759474620713**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **VAISHNAV KOMAL MITESHKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **560**

GU Enrolment No.: **202303104887**

ABC ID: **913111543978**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **VALEKAR HETAL HASMUKHBHAI**

Class: **B. Com. Sem.-6**

Roll No. **561**

GU Enrolment No.: **202303104890**

ABC ID: **402790416573**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

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Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **VANIYA DHRUV ASHOKBHAI**

Class: **B. Com. Sem.-6**

Roll No. **562**

GU Enrolment No.: **202303104894**

ABC ID: **161638709718**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **VANIYA PARTHKUMAR VIJAYBHAI**

Class: **B. Com. Sem.-6**

Roll No. **563**

GU Enrolment No.: **202303104895**

ABC ID: **140631775531**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **ZALA VAISHALIBEN HARENDRASINH**

Class: **B. Com. Sem.-6**

Roll No. **564**

GU Enrolment No.: **202303104926**

ABC ID: **571524090923**

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____



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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **BHATT AYUSH GAURANGKUMAR**

Class: **B. Com. Sem.-6**

Roll No. **565**

GU Enrolment No.: **202303104334**

ABC ID:

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **VASUDEV NIKHILKUMAR BHARATBHAI**

Class: **B. Com. Sem.-6**

Roll No. **566**

GU Enrolment No.: **202303104904**

ABC ID:

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

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Appendix VII: Internal Evaluation by College and Internship Completion Certificate

College: **G. B. Shah Commerce College, Vasna, Ahmedabad-07**

Student's Name: **GHANCHI ASNAD IQBALBHAI**

Class: **B. Com. Sem.-6**

Roll No. **567**

GU Enrolment No.: **202303104428**

ABC ID:

Internship Supervisor's Name: _____

Internship Period: _____ to _____

Internship Organization Name and Address: _____

Sr. No.	Particular	Marks
1	Weekly Report	/15
2	Written Report	/15
3	Viva Voce Examination	/20
	Total	/50

Internship Completion Certificate

This is to certify that the above mentioned student has successfully completed his / her Internship of 120 Hours from _____ (Starting Date) to _____ (Ending Date) under the supervision of _____ (Supervisor's Name) of _____ (Agency Name).

Additional Remarks, if any:

Signature of Faculty Mentor: _____

Date: _____

