A. U. LUV ATSTENDANCE

INSPECTION CUM VERIFICATION REPORT

(For Office Use Only)

It is certified that the undersigned has conducted on spot verification with regard to declaration made by the applicant in his application form for his registration as an artisan Craft. VERIFICATION / ANTECEDENTS OF APPLICANT. A). 01. Full Name (in Capital Letters) Parentage / Husband's Name Permanent Address PROFICIENCY IN THE LINE 8). 01. Craft Practising. Nature of Practising: (Tick the relevant column) C). (A). Full Time. Part Time. (B). Place of work Karkhana / Residential House (Mention Address) (C) **RECOMMENDATIONS:** C). The applicant has been put to the practical test merely to determine his/her skill in the craft. The applicant has been found conversant in the said craft and is earning livelihood out of it. The applicant qualifies for registration as an artisan in_ is recommended for grant of registration. The documents in support of registration as an artisan submitted by the applicant have been checked/verified and found correct. The sample(s) attempted by the applicant are also enclosed. Signature of the Verifying Officer Name Design: Place of posting__ ADH (Sig.)