



STATE COUNCIL FOR TECHNICAL EDUCATION & VOCATIONAL  
TRAINING, ODISHA, UNIT-VIII, NEAR RAJ BHAWAN,  
BHUBANESWAR-12.

No. 1024 /dt. 25.2.2017

From

Sri B.Badhai,  
Controller of Examinations.

To

The Centre Superintendents of  
all Trade Testing Centres – AITT Feb. 2017.

**Sub: Modification of attendance and OMR Answer Book No. of AITT Feb. 2017  
(Theory).**

Sir,

In inviting a reference to the subject cited above, Centre Superintendents of some Trade Testing Centres have requested to modify Exam. attendance (Present/Absent/ Mal Practice) and also to edit OMR Answer Book No. as those have been entered wrongly in Vidyarthi Portal. For attendance modification, first OMR Answer Books are to be deleted from Vidyarthi Portal and for OMR Answer Books modification both incorrect and correct Answer Book Nos. are required. These activities will be done by the Council.

Hence, Centre Superintendents are instructed to compile such data for each sitting of each day of examination till 01.03.2017 and then to **submit the data in hard copies in the Council by 03.03.2017**. Required formats are enclosed herewith.

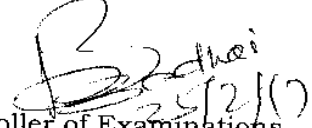
1. Format -A – Attendance modification.
2. Format – B – OMR Answer Book number modification

Neither date of submission will be extended nor any deviation **in the format will be accepted** .

Further, reports receipt from different Trade Testing Centres regarding non-availability of trainee data in descriptive roll in Vidyarthi Portal for different semesters in different dates and sittings of examinations. All are requested to check Council website regularly for further instructions in this regard.

*end as above*

Yours faithfully,

  
Controller of Examinations.

**FORMAT - A - Attendance Modification**

District

Name of the T.T.C

| Sl. No. | Name of the Tagged ITI | Date of Exam. | of Sitting | Semester | Trade | Paper | Roll No. | Name of Trainee | Incorrect attendance (P/Abs/M.P) | Correct attendance (P/Abs/M.P) | OMR No. |
|---------|------------------------|---------------|------------|----------|-------|-------|----------|-----------------|----------------------------------|--------------------------------|---------|
|         |                        |               |            |          |       |       |          |                 |                                  |                                |         |
|         |                        |               |            |          |       |       |          |                 |                                  |                                |         |

Signature of Centre  
Superintendent T.T.C

**FORMAT - B - OMR Answer Book no. modification**

District

Name of the T.T.C

| Sl. No. | Name of the Tagged ITI | Date of Exam. | of Sitting | Semester | Trade | Paper | Roll No. | Name of Trainee | Incorrect OMR No. | Correct OMR |
|---------|------------------------|---------------|------------|----------|-------|-------|----------|-----------------|-------------------|-------------|
|         |                        |               |            |          |       |       |          |                 |                   |             |
|         |                        |               |            |          |       |       |          |                 |                   |             |

Signature of Centre  
Superintendent T.T.C