

# CERTIFICATE

Name of the Intern : ..... Yogesh Ganpatrao Thakre .....

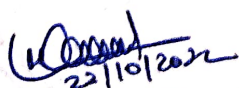
Internship posting started on ..... 23/10/21 ..... Completed on ..... 22/10/2022 .....

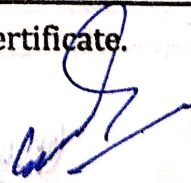
No. of days repeated due to absentee : ..... 7 .....

Reason for repetition : ..... — .....

Sr. No.	Name of Department	Period of Posting		Attend ance	Remarks of HOD	Sign.
		From	To			
1	Orientation programme	23/10/21	24/10/21	5/5		
2	2) Community Medicine - a) UHC b) PHC/RHTC	26/4/22	25/5/22	30/30	Satisfactory	
		26/5/22	24/6/22	30/30		
3	General Medicine	10/7/22	23/8/22	45/45	Good	
4	Psychiatry	25/6/22	9/7/22	15/15	Good	
5	General Surgery	8/9/22	22/10/22	45/45	Good	
6	Anaesthesia	24/8/22	7/9/22	15/15	Good	
7	Obst. & Gynaec. Including family welfare	28/10/21	26/12/21	60/60	Good	
8	Paediatrics	26/1/22	24/2/22	30/30	Good	
9	Orthopedics including P.M.R.	27/12/21	25/1/22	30/30	OK	
10	E.N.T.	25/2/22	11/3/22	15/15	Good	
11	Ophthalmology	12/3/22	26/3/22	15/15	Good	
12	Casualty	27/3/22	10/4/22	15/15	Good	
13	Elective Posting - any one (Dermatology & STD/T. B. & Respiratory Diseases / Radio-Diagnosis / Blood Bank / Forensic Medicine / Psychiatry).	11/4/22	25/4/22	15/15	Good	
14	Repetition, if any					

Recommended / Not recommended to issue internship completion certificate.

for   
**Professor & Head**  
 Dept. of Community Medicine  
 BKL Walawalkar Rural Medical College &  
 Hospital

  
**Dean / Principal**  
 BKL Walawalkar Rural Medical  
 College & Hospital