

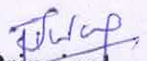
Swami Vivekanand Shikshan Prasarak Mandal  
**Swami Vivekanand College of Nursing, Udgir**  
Bodhan Nagar, Jalkot Road, Udgir Dist. Latur

**SELF EVALUATION FORMAT**

Name of the student : ... Maske Rutuja Ashok .....

Date : ... 8-8-2023 .....

01	I intended to directions	Almost always
		Sometime
		Not very often
02	I followed directions	Almost always
		Sometime ✓
		Not very often
03	I could do my work on time	Almost always
		Sometime
		Not very often ✓
04	I could explain my work	Almost always
		Sometime
		Not very often
05	I worked with my group	Almost always
		Sometime
		Not very often

  
Principal

**Principal**  
Swami Vivekanand College  
of Nursing, Udgir Dist. Latur


Swami Vivekanand Shikshan Prasarak Mandal  
**Swami Vivekanand College of Nursing, Udgir**  
 Bodhan Nagar, Jalkot Road, Udgir Dist. Latur

**SELF EVALUATION FORMAT**

Name of the student : Jogland Rohini Dharmraj

Date : 24/03/23

01	I intended to directions	✓	Almost always
			Sometime
			Not very often
02	I followed directions		Almost always
		✓	Sometime
			Not very often
03	I could do my work on time	✓	Almost always
			Sometime
			Not very often
04	I could explain my work		Almost always
		✓	Sometime
			Not very often
05	I worked with my group	✓	Almost always
			Sometime
			Not very often

  
Principal

**Principal**  
 Swami Vivekanand College  
 of Nursing, Udgir Dist. Latur




Swami Vivekanand Shikshan Prasarak Mandal  
**Swami Vivekanand College of Nursing, Udgir**  
Bodhan Nagar, Jalkot Road, Udgir Dist. Latur

**SELF EVALUATION FORMAT**

Name of the student : ..... musale pallavi<sup>o</sup> Balasahab .....

Date : ..... 01/10/2023 .....

01	I intended to directions	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
02	I followed directions	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
03	I could do my work on time	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
04	I could explain my work	<input type="checkbox"/>	Almost always
		<input checked="" type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
05	I worked with my group	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often

  
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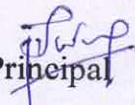
Swami Vivekanand Shikshan Prasarak Mandal  
**Swami Vivekanand College of Nursing, Udgir**  
Bodhan Nagar, Jalkot Road, Udgir Dist. Latur

**SELF EVALUATION FORMAT**

Name of the student : ..... Zingade Aditya Balkrishna .....

Date : ..... 13/06/23 .....

01	I intended to directions	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
02	I followed directions	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
03	I could do my work on time	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
04	I could explain my work	<input type="checkbox"/>	Almost always
		<input checked="" type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
05	I worked with my group	<input type="checkbox"/>	Almost always
		<input checked="" type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often

  
Principal

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Bodhan Nagar, Jalkot Road, Udgir Dist. Latur

**SELF EVALUATION FORMAT**

Name of the student : ..Siddiqui Raif Wajeeed.....

Date : ..29-11-2023.....

01	I intended to directions	<input type="checkbox"/>	Almost always
		<input checked="" type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
02	I followed directions	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
03	I could do my work on time	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
04	I could explain my work	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
05	I worked with my group	<input type="checkbox"/>	Almost always
		<input checked="" type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often

  
Principal

Principal  
Swami Vivekanand College  
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Swami Vivekanand Shikshan Prasarak Mandal

# Swami Vivekanand College of Nursing, Udgir

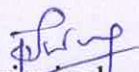
Bodhan Nagar, Jalkot Road, Udgir Dist. Latur

## SELF EVALUATION FORMAT

Name of the student : Ghule Nikita Ramdas

Date : 15-08-2023

01	I intended to directions	<input type="checkbox"/>	Almost always
		<input checked="" type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
02	I followed directions	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
03	I could do my work on time	<input type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input checked="" type="checkbox"/>	Not very often
04	I could explain my work	<input type="checkbox"/>	Almost always
		<input checked="" type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
05	I worked with my group	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often

  
Principal

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Swami Vivekanand College  
of Nursing, Udgir Dist. Latur




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**Swami Vivekanand College of Nursing, Udgir**  
 Bodhan Nagar, Jalkot Road, Udgir Dist. Latur

**SELF EVALUATION FORMAT**

Name of the student : Tanvi Padiksha Hanumanant

Date : 28-4-23

01	I intended to directions	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
02	I followed directions	<input type="checkbox"/>	Almost always
		<input checked="" type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
03	I could do my work on time	<input type="checkbox"/>	Almost always
		<input checked="" type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
04	I could explain my work	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
05	I worked with my group	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often

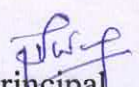
  
 Principal  
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Swami Vivekanand Shikshan Prasarak Mandal  
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 Bodhan Nagar, Jalkot Road, Udgir Dist. Latur

**SELF EVALUATION FORMAT**

Name of the student : Chavan Angeli Sombhaji  
 Date : 7/7/23

01	I intended to directions	✓	Almost always
			Sometime
			Not very often
02	I followed directions	✓	Almost always
			Sometime
			Not very often
03	I could do my work on time	✓	Almost always
			Sometime
			Not very often
04	I could explain my work	✓	Almost always
			Sometime
			Not very often
05	I worked with my group	✓	Almost always
			Sometime
			Not very often

  
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Bodhan Nagar, Jalkot Road, Udgir Dist. Latur

**SELF EVALUATION FORMAT**

Name of the student : Wande Rutuja Radradip

Date : 8-7-23

01	I intended to directions	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
02	I followed directions	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
03	I could do my work on time	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
04	I could explain my work	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
05	I worked with my group	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often

  
Principal

Swami Vivekanand College  
of Nursing, Udgir Dist. Latur

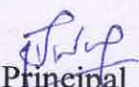
Swami Vivekanand Shikshan Prasarak Mandal  
**Swami Vivekanand College of Nursing, Udgir**  
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**SELF EVALUATION FORMAT**

Name of the student : ..... Khede Maya Sanjay .....

Date : ..... 2-7-23 .....

01	I intended to directions	<input type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
02	I followed directions	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
03	I could do my work on time	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
04	I could explain my work	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
05	I worked with my group	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often

  
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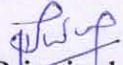


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**SELF EVALUATION FORMAT**

Name of the student : Rainule Anjali Sudhakar  
Date : 09-01-2023

01	I intended to directions	Almost always
		Sometime
		Not very often
02	I followed directions	Almost always
		Sometime
		Not very often
03	I could do my work on time	Almost always
		Sometime
		Not very often
04	I could explain my work	Almost always
		Sometime
		Not very often
05	I worked with my group	Almost always
		Sometime
		Not very often

  
Principal

**Principal**  
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of Nursing, Udgir Dist. Latur

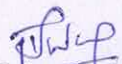
Swami Vivekanand Shikshan Prasarak Mandal  
**Swami Vivekanand College of Nursing, Udgir**  
Bodhan Nagar, Jalkot Road, Udgir Dist. Latur

**SELF EVALUATION FORMAT**

Name of the student : ... Raut Ruluja Peemath .....

Date : ... 09-01-2023 .....

01	I intended to directions		Almost always
			Sometime
			Not very often
02	I followed directions		Almost always
			Sometime
			Not very often
03	I could do my work on time		Almost always
			Sometime
			Not very often
04	I could explain my work		Almost always
			Sometime
			Not very often
05	I worked with my group		Almost always
			Sometime
			Not very often

  
Principal

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Bodhan Nagar, Jalkot Road, Udgir Dist. Latur

**SELF EVALUATION FORMAT**

Name of the student : ...Shivdase Nikita Devidas.....

Date : ...09-01-2023.....

01	I intended to directions	Almost always
		Sometime
		Not very often
02	I followed directions	Almost always
		Sometime
		Not very often
03	I could do my work on time	Almost always
		Sometime
		Not very often
04	I could explain my work	Almost always
		Sometime
		Not very often
05	I worked with my group	Almost always
		Sometime
		Not very often

  
Principal

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of Nursing, Udgir Dist. Latur

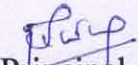
Swami Vivekanand Shikshan Prasarak Mandal  
**Swami Vivekanand College of Nursing, Udgir**  
Bodhan Nagar, Jalkot Road, Udgir Dist. Latur

**SELF EVALUATION FORMAT**

Name of the student : Anjali Anil Dhaygude

Date : 11/06/2023

01	I intended to directions	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
02	I followed directions	<input type="checkbox"/>	Almost always
		<input checked="" type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
03	I could do my work on time	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
04	I could explain my work	<input type="checkbox"/>	Almost always
		<input checked="" type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
05	I worked with my group	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often

  
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Bodhan Nagar, Jalkot Road, Udgir Dist. Latur

**SELF EVALUATION FORMAT**

Name of the student : Rupali Nagnath Riddowad

Date : 6/05/2023

01	I intended to directions	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
02	I followed directions	<input type="checkbox"/>	Almost always
		<input checked="" type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
03	I could do my work on time	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
04	I could explain my work	<input type="checkbox"/>	Almost always
		<input checked="" type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
05	I worked with my group	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often

  
Principal

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Bodhan Nagar, Jalkot Road, Udgir Dist. Latur

**SELF EVALUATION FORMAT**

Name of the student : Pawar Kajal Gunvant.....

Date : 10/10/2023.....

01	I intended to directions	<input type="checkbox"/>	Almost always
		<input checked="" type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
02	I followed directions	<input type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input checked="" type="checkbox"/>	Not very often
03	I could do my work on time	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
04	I could explain my work	<input type="checkbox"/>	Almost always
		<input checked="" type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
05	I worked with my group	<input type="checkbox"/>	Almost always
		<input checked="" type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often

  
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Bodhan Nagar, Jalkot Road, Udgir Dist. Latur

**SELF EVALUATION FORMAT**

Name of the student : ... Kendde vaishnavi Pealhad .....

Date : ... 4-5-2023 .....

01	I intended to directions		Almost always
			Sometime
		✓	Not very often
02	I followed directions	✓	Almost always
			Sometime
			Not very often
03	I could do my work on time	✓	Almost always
			Sometime
			Not very often
04	I could explain my work	✓	Almost always
			Sometime
			Not very often
05	I worked with my group	✓	Almost always
			Sometime
			Not very often

  
Principal

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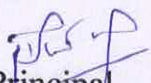
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**Swami Vivekanand College of Nursing, Udgir**  
Bodhan Nagar, Jalkot Road, Udgir Dist. Latur

**SELF EVALUATION FORMAT**

Name of the student : Peadheme Peadhya Ashroba

Date : 09-01-2022

01	I intended to directions	Almost always
		Sometime
		Not very often
02	I followed directions	Almost always
		Sometime
		Not very often
03	I could do my work on time	Almost always
		Sometime
		Not very often
04	I could explain my work	Almost always
		Sometime
		Not very often
05	I worked with my group	Almost always
		Sometime
		Not very often

  
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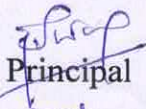
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**Swami Vivekanand College of Nursing, Udgir**  
Bodhan Nagar, Jalkot Road, Udgir Dist. Latur

**SELF EVALUATION FORMAT**

Name of the student : ..... Bhusare Poojad .....

Date : ..... 08/04/2022 .....

01	I intended to directions	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
02	I followed directions	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
03	I could do my work on time	<input type="checkbox"/>	Almost always
		<input checked="" type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
04	I could explain my work	<input type="checkbox"/>	Almost always
		<input checked="" type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
05	I worked with my group	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often

  
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**SELF EVALUATION FORMAT**

Name of the student : Adake Shradha Vijaykumar.....

Date : 11/4/2022.....

01	I intended to directions	<input type="checkbox"/>	Almost always
		<input checked="" type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
02	I followed directions	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
03	I could do my work on time	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
04	I could explain my work	<input type="checkbox"/>	Almost always
		<input checked="" type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
05	I worked with my group	<input type="checkbox"/>	Almost always
		<input checked="" type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often

  
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Bodhan Nagar, Jalkot Road, Udgir Dist. Latur

**SELF EVALUATION FORMAT**

Name of the student : ..Kamble..Vaishnavi..Manik.....

Date : ..12-9-2022.....

01	I intended to directions	Almost always
		Sometime
		Not very often
02	I followed directions	Almost always
		Sometime
		Not very often
03	I could do my work on time	Almost always
		Sometime
		Not very often
04	I could explain my work	Almost always
		Sometime
		Not very often
05	I worked with my group	Almost always
		Sometime
		Not very often

  
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**SELF EVALUATION FORMAT**

Name of the student : ..Rathod shubhangi..shivaji.....

Date : .....17-9-2022.....

01	I intended to directions	Almost always
		Sometime
		Not very often
02	I followed directions	Almost always
		Sometime
		Not very often
03	I could do my work on time	Almost always
		Sometime
		Not very often
04	I could explain my work	Almost always
		Sometime
		Not very often
05	I worked with my group	Almost always
		Sometime
		Not very often

  
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**SELF EVALUATION FORMAT**

Name of the student : Mare Vaishnavi Tukaram.....

Date : 06/01/2022.....

01	I intended to directions	<input type="checkbox"/>	Almost always
		<input checked="" type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
02	I followed directions	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
03	I could do my work on time	<input type="checkbox"/>	Almost always
		<input checked="" type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
04	I could explain my work	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
05	I worked with my group	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often

Principal

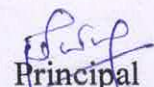
Swami Vivekanand Shikshan Prasarak Mandal  
**Swami Vivekanand College of Nursing, Udgir**  
 Bodhan Nagar, Jalkot Road, Udgir Dist. Latur

**SELF EVALUATION FORMAT**

Name of the student : ... Khamittkar Ishika Laxman .....

Date : ... 14/08/21 .....

01	I intended to directions		Almost always
		✓	Sometime
			Not very often
02	I followed directions	✓	Almost always
			Sometime
			Not very often
03	I could do my work on time	✓	Almost always
			Sometime
			Not very often
04	I could explain my work		Almost always
		✓	Sometime
			Not very often
05	I worked with my group		Almost always
		✓	Sometime
			Not very often

  
 Principal  
**Principal**  
 Swami Vivekanand College  
 of Nursing, Udgir Dist. Latur



Swami Vivekanand Shikshan Prasarak Mandal  
**Swami Vivekanand College of Nursing, Udgir**  
 Bodhan Nagar, Jalkot Road, Udgir Dist. Latur

**SELF EVALUATION FORMAT**

Name of the student : ...*Kasbe Shila Nagma*th.....

Date : ..*12/10/2019*.....

01	I intended to directions	<input type="checkbox"/>	Almost always
		<input checked="" type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
02	I followed directions	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
03	I could do my work on time	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
04	I could explain my work	<input type="checkbox"/>	Almost always
		<input checked="" type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
05	I worked with my group	<input type="checkbox"/>	Almost always
		<input checked="" type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often

*[Signature]*  
 Principal  
**Principal**  
 Swami Vivekanand College  
 of Nursing, Udgir Dist. Latur

Swami Vivekanand Shikshan Prasarak Mandal  
**Swami Vivekanand College of Nursing, Udgir**  
Bodhan Nagar, Jalkot Road, Udgir Dist. Latur

**SELF EVALUATION FORMAT**

Name of the student : ..Nikita pandurang bhise.....  
Date : ..12/07/18.....

01	I intended to directions	<input type="checkbox"/>	Almost always
		<input checked="" type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
02	I followed directions	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
03	I could do my work on time	<input type="checkbox"/>	Almost always
		<input checked="" type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
04	I could explain my work	<input checked="" type="checkbox"/>	Almost always
		<input type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often
05	I worked with my group	<input type="checkbox"/>	Almost always
		<input checked="" type="checkbox"/>	Sometime
		<input type="checkbox"/>	Not very often

  
Principal

**Principal**  
Swami Vivekanand College  
of Nursing, Udgir Dist. Latur



Swami Vivekanand Shikshan Prasarak Mandal  
**Swami Vivekanand College of Nursing, Udgir**  
Bodhan Nagar, Jalkot Road, Udgir Dist. Latur

**SELF EVALUATION FORMAT**

Name of the student : Whavle.....Gayali.....Jalshitam.....

Date : 14/05/18.....

01	I intended to directions	Almost always
		Sometime
		Not very often
02	I followed directions	Almost always
		Sometime
		Not very often
03	I could do my work on time	Almost always
		Sometime
		Not very often
04	I could explain my work	Almost always
		Sometime
		Not very often
05	I worked with my group	Almost always
		Sometime
		Not very often

  
Principal

**Principal**  
Swami Vivekanand College  
of Nursing, Udgir Dist. Latur