



Vidarbha Youth Welfare Society's
PROF RAM MEGHE COLLEGE OF ENGINEERING & MANAGEMENT
INTERNAL QUALITY ASSURANCE CELL



Format: IO-IX

Report on Mock Interview / Test
(Name of Department / Cell)

Session:	
Semester:	
Mock Interview/Test on:	
Date:	
Time:	
Interviewer Name:	
Designation:	
Contact No.:	
Email-Id:	
Address:	

Student Details:

Branch	I	II	III	IV	V	VI	VII	VIII	Total Count
CE									
CSE									
EE									
EXTC									
Grand Total									

Objectives:	
Outcomes:	
Remarks (if any):	

Co-ordinator
(Name & Signature)

Head
(Department/Cell)