Department of

<FYDP Course Code> Final Year Design Project

**Attendance of Final Year Project Group**

*(To be maintained by the Supervisor/Co-Supervisor)* F/SOP FYDP/06/00

**For Fall Semester For Spring Semester**

Name (Supervisor/Co-Supervisor): Title of Project:

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| **Seat No.** | **Name of Students** | **Meetings** | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** | **13** | **14** | **15** | **16** | **Meetings Attended** | **%****Attended** |
| **Date** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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Signature with Date

Supervisor

Signature with Date

FYDP Coordinator

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