



DEPARTMENT OF EDUCATION

CERTIFICATE OF COMPLETION

GAYATHRI K

This is to certify that Mr./Ms. _____

II B.Ed

From _____ has completed the VALUE ADDED COURSE

On **Special Education** from 27/09/2021 to 20/10/2021 conducted by the
Department of Education, Periyar Maniammai Institute of Science & Technology,
Vallam, Thanjavur - 613 403.

CONVENER

(Dr. S. Srinivasan)

HEAD

(Dr. G. Thamilselvan)



DEPARTMENT OF EDUCATION

CERTIFICATE OF COMPLETION

This is to certify that Mr./Ms. LAILA K

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CONVENER
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REVATHI J

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SUREKA K

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ABINAYA M

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AKILA P

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ANBUENIYAL S

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DHIVYA R

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GNANASOWNDARI S M

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GOWSALYA M

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KANAGAJOTHIMANI M

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RAJESHWARI G

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RESHMA C

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REVATHI K

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SINDHU M

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SUGANTHI A

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VINITHA B

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(Dr. S. Srinivasan)

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(Dr. G. Thamilselvan)



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VEERAMMAL K

This is to certify that Mr./Ms. _____

II B.Ed

From _____ has completed the VALUE ADDED COURSE
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KAVITHA L

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This is to certify that Mr./Ms. Elakkiya M

From II B.Sc.B.ED has completed the VALUE ADDED COURSE
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(Dr. S. Srinivasan)

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(Dr. G. Thamilselvan)



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This is to certify that Mr./Ms. Janani Sri K

From II B.Sc.B.ED has completed the VALUE ADDED COURSE
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(Dr. S. Srinivasan)

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(Dr. G. Thamilsivanan)



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CERTIFICATE OF COMPLETION

This is to certify that Mr./Ms. Kaniha B

From II B.Sc.B.ED has completed the VALUE ADDED COURSE
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(Dr. S. Srinivasan)

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(Dr. G. Thamilselvan)



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CERTIFICATE OF COMPLETION

This is to certify that Mr./Ms. Keerthana A

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(Dr. G. Thamilsivanan)



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CERTIFICATE OF COMPLETION

This is to certify that Mr./Ms. **Muthupriyadharsini S**

From **II B.Sc.B.ED** has completed the VALUE ADDED COURSE
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(Dr. S. Srinivasan)

HEAD
(Dr. G. Tamilvanan)



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CERTIFICATE OF COMPLETION

This is to certify that Mr./Ms. **Nithiyasri M**

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(Dr. S. Srinivasan)

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This is to certify that Mr./Ms. **Zaitoon Beevi S**

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This is to certify that Mr./Ms. **Mahakavi M**

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This is to certify that Mr./Ms. Sivapriya K

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CONVENER
(Dr. S. Srinivasan)

HEAD
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