

**Minutes of the Third Class Committee Meeting**

*Agenda: (i) Attendance verification  
(ii) Verification of grade cut off*

Semester: Jan-May/Jul-Nov

AY: 20.....-20.....

Batch, Year, Sem (eg. EC20,III,5) :  
 Date and time of the CC Meeting :  
 Name of the CC Chairperson :  
 Verification of grade cut off : To be entered on the rear side of this form  
 Verification of attendance : To be entered on the rear side of this form

Members Present:		Members Absent:

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 Signature of the course faculty

CC Chairperson

HoD

PIC(Acad.)

PIC(Exam.)

Dean (Acad.)

## Course Evaluation Statistics

(to be entered by the CC Chairperson)

S. No	Course Code	Course Name	No. of students registered	Grade Cut Off*						Frequency of Grades						No. of students secured		No. of students under AES		
				S	A	B	C	D	E	S	A	B	C	D	E	U	W			

\*Please enter cut off marks for all grades from S to E

The details of students falling under Alternate Evaluation Scheme (AES) and their evaluation should be submitted in the format E7

**Attendance verification**

Certified that the attendance sheets for all the above courses have been verified.

Date:

CC Chairperson