

Appendix III

Concurrent fieldwork attendance

Name of the Student: Shaniya Shaikh

Enrollment No:

Semester: II

Name of Agency: Urban Health Centre Margao - Goa.

Date	Time (In - Out)	Activities Conducted	Total number of hours	Signature of Student	Signature of the agency supervisor	Signature of the faculty supervisor
24/1/24	9:30-4:30	- Filling NCD Patient form - Introduction on (NCD)	7	Shaniya	il	Shaniya
25/1/24	9:30-4:30	- Observing Immunization Tsw gave syrup to the	7	Shaniya	il	Shaniya
31/1/24	9:30-4:30	children as part of the immunization process.	7	Shaniya	il	Shaniya
31/1/24	9:30-4:30	To fill the form of NCD Patients	7	Shaniya	il	Shaniya
1/2/24	9:30-4:30	To observe immunization	7	Shaniya	il	Shaniya
7/2/24	9:30-4:30	To fill NCD form & attended talk on stress	7	Shaniya	il	Shaniya
8/2/24	9:30-4:30	checked weight of kids in immunization.	7	Shaniya	il	Shaniya
14/2/24	9:30-4:30	CBAC form, discussion with health educator & sister	7	Shaniya	il	Shaniya
15/2/24	9:30-4:30	To visit Kosari school for health checkup	7	Shaniya	il	Shaniya
21/2/24	9:30-4:30	CBAC form, interact with sister regarding poster.	7	Shaniya	il	Shaniya
22/2/24	9:30-4:30	To visit Anganwadi for health check with Dr.	7	Shaniya	il	Shaniya
12/2/24	8:00-3:00	Individual Conference Report Goa University		Shaniya		Shaniya
12/2/24	2:30-3:00	Group Conference report Goa University		Shaniya		Shaniya
28/2/24	9:30-4:30	Did the survey in Moridonger & filled CBAC form	7	Shaniya	il	Shaniya
Total number of Fieldwork days attended (per semester):						
Total number of fieldwork days absent (per semester):						
Signature of student:				Signature of faculty supervisor:		

Appendix III

Concurrent fieldwork attendance

Name of the Student: Shanya Shrivastava

Enrollment No:

Semester: I

Name of Agency: Urban Health Center Margao Goa.

[illegible]



Manohar Parrikar School of Law, Governance and Public Policy

**Master of Social Work
Concurrent Fieldwork Evaluation**

Name of the Trainee Social Worker	SHANIYA SHAIKH.
Semester	II
Name and Address of the Agency	Urban Health Centre, Margao DHS, Govt of Goa.
Name of the Agency Supervisor with Contact Details	Dr. BAPTISTO MASCARENHAS 9011025064.

Feedback for the student:

Keep up the good work.



Buy
Medical Officer Incharge
Urban Health Centre
Margao - Goa

Attendance Certificate

I hereby certify that Ms. / Mr. SHANIYA SHAIKH has fulfilled
the requirement of 100% attendance in Concurrent Field Work Training From 24/01/2024
to 28/03/2024. Overall Grading of the Student's Performance:
Excellent (Needs Improvement/ Satisfactory/Good/Excellent)

B. S.
27/03/2024



(Agency Supervisor Signature with Date & Seal)

Medical Officer Incharge
Urban Health Centre
Margao - Goa