INTERNAL ASSESSMENT FORMAT FIRST YEAR ANM												
				F1TI	F2TI	F3TI	F4TI	F1P1	F2P1			
								Community Health				
S No.	Roll No.	Name	Father's Name	Community Health		Primary Health		Nursing and Health				
				Nursing	<b>Health Promotion</b>	Care Nursing	Child Health Nursing	Promotion	Child Health Nursing			
				25	25	25	25	100	100			

INTERNAL ASSESSMENT FORMAT SECOND YEAR ANM												
S No.	Roll No.	Name	Father's Name	S1TI	S2TI	S1P1	S2P1					
				Midwiefry	Health Centre Management	Midwifery	Primary Health Care Nursing & Health Centre Management					
				25	25	100	100					