



### J.J.M. MEDICAL COLLEGE (RGUHS UNIVERSITY), DAVANGERE ELECTIVE LOGBOOK FOR UNDERGRADUATES (AS PER CBME)







J. J. M Medical College (RGUHS University), DAVANGERE

# Electives Logbook for Undergraduates

AS PER

COMPETENCY BASED CURRICULUM

#### Contents

| Sr.No. | Item                               | Page<br>No. |  |
|--------|------------------------------------|-------------|--|
| 1.     | Detail Write up of Elective 1      |             |  |
| 2.     | Work diary for Elective 1          |             |  |
| 3.     | Daily attendance for elective 1    |             |  |
| 4.     | Feedback by students on elective 1 |             |  |
| 5.     | Feedback by faculty on elective 1  |             |  |
| 6.     | Detail Write up of Elective 2      |             |  |
| 7.     | Work diary for Elective 2          |             |  |
| 8.     | Daily attendance for elective 2    |             |  |
| 9.     | Feedback by students on elective 2 |             |  |
| 10.    | Feedback by faculty on elective 2  |             |  |

NAME OF THE CANDIDATE:

ROLL NO:

UNIVERSITY REGISTRATION NUMBER:

SUBJECT:

YEAR:

## Certificate of Completion of

#### **Elective 1 and Elective 2**

Name of the Student \_\_\_\_\_

Roll No\_\_\_\_\_ Year of Admission \_\_\_\_\_

Elective 1 :

Topic :

Duration :

Attendance : Satisfactory / Not Satisfactory

Satisfactory Completion of electives Yes / No

Signature of Student

Signature of Guide / HOD

Elective 2 :

Topic :

Duration :

Attendance : Satisfactory / Not Satisfactory

Satisfactory Completion of electives Yes / No

Signature of Student

Signature of Guide / HOD

Date:

Place:

Signature of Principal

#### Detail Write up of Elective 1

COURSE TITLE:

NAME OF THE PRECEPTOR:

COURSE DESCRIPTION:

#### Work diary for Elective 1

| SL NO | DATE | ACTIVITY | SIGNATURE OF<br>PRECEPTOR |
|-------|------|----------|---------------------------|
| 1     |      |          |                           |
| 2     |      |          |                           |
| 3     |      |          |                           |
| 4     |      |          |                           |
| 5     |      |          |                           |
| 6     |      |          |                           |
| 7     |      |          |                           |
| 8     |      |          |                           |
| 9     |      |          |                           |
| 10    |      |          |                           |
| 11    |      |          |                           |
| 12    |      |          |                           |
| 13    |      |          |                           |
| 14    |      |          |                           |
| 15    |      |          |                           |

#### Daily attendance for elective 1 (From / / 2023 to / /2023)

| SL.NO | DATE | PRESENT/ABSENT | SIGNATURE OF PRECEPTOR |
|-------|------|----------------|------------------------|
| 1     |      |                |                        |
| 2     |      |                |                        |
| 3     |      |                |                        |
| 4     |      |                |                        |
| 5     |      |                |                        |
| 6     |      |                |                        |
| 7     |      |                |                        |
| 8     |      |                |                        |
| 9     |      |                |                        |
| 10    |      |                |                        |
| 11    |      |                |                        |
| 12    |      |                |                        |
| 13    |      |                |                        |
| 14    |      |                |                        |
| 15    |      |                |                        |

**Remark of HOD** 

Signature of HOD

Feedback by students on elective 1

Feedback by faculty on elective 1

### Detail Write up of Elective 2

COURSE TITLE:

NAME OF THE PRECEPTOR:

COURSE DESCRIPTION:

#### Work diary for Elective 2

| SL NO | DATE | TITLE | SIGNATURE OF<br>PRECEPTOR |
|-------|------|-------|---------------------------|
| 1     |      |       |                           |
| 2     |      |       |                           |
| 3     |      |       |                           |
| 4     |      |       |                           |
| 5     |      |       |                           |
| 6     |      |       |                           |
| 7     |      |       |                           |
| 8     |      |       |                           |
| 9     |      |       |                           |
| 10    |      |       |                           |
| 11    |      |       |                           |
| 12    |      |       |                           |
| 13    |      |       |                           |
| 14    |      |       |                           |
| 15    |      |       |                           |

#### Daily attendance for elective 2 (From / / 2023 to / /2023)

| SL NO | DATE | PRESENT/ABSENT | SIGNATURE OF PRECEPTOR |
|-------|------|----------------|------------------------|
| 1     |      |                |                        |
| 2     |      |                |                        |
| 3     |      |                |                        |
| 4     |      |                |                        |
| 5     |      |                |                        |
| 6     |      |                |                        |
| 7     |      |                |                        |
| 8     |      |                |                        |
| 9     |      |                |                        |
| 10    |      |                |                        |
| 11    |      |                |                        |
| 12    |      |                |                        |
| 13    |      |                |                        |
| 14    |      |                |                        |
| 15    |      |                |                        |

**Remark of HOD** 

Signature of HOD

Feedback by students on elective 2

Feedback by faculty on elective 2

#### ROLES THAT DEFINE INDIAN MEDICAL GRADUATE

Professional







Lifelong Learner



