

APPLICATION FORM FOR INTERNSHIP PERMISSION

Name of the Student:
Father's Name:
Enrollment / SRC Number:
COURSE: Branch :
Year / Semester: Contact Number :
E-mail ID:
It is part of the Curriculum: Yes or No:
Wish to apply for an Internship at:
Name of the Organization:
Address:
Government / Government Aided /
Research Lab / Private Hospital / PVT. Lab (Please Indicate):
Duration of the said Internship (with date):
The letter has to be addressed to, Name of the Employee:
Designation:
Address:
E-mail Id:

DECLARATION

I hereby declare that all the information provided by me is true to the best of my knowledge & belief. I further declare that I am abided by the regulations and eligibility conditions of the University. I understand that I may be required to furnish additional information/ documents in case of requirement from the Council.

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Signature of the Student

MANDATORY ENCLOSURES: (UPLOAD)

1. Online Transaction Fees Slip, 2. Final Semester Mark sheet, 3. Declaration letter by Parents.
4. Self-attested photo copy of Proof of Identity, 5. No Objection Certificate for Principal, 6. Student
Signature, 7. Signature of Parents

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Signature of HOD (with date & seal)

ANNEXURE DECLARATION BY PARENTS

I, _____ F/O or M/O _____ studying
_____ hereby _____ permit my son /
daughter to undertake the _____. I understand that the travel by rail /
road / Airways and the stay outside the limits of the campus may involve risk of physical harm, under
unexpected circumstances. I assure that my son / daughter is responsible for his behavior during the
internship and I will neither blame the Council nor demand compensation for the same or for the results
of any untoward incidents.

Thanking you,
Yours faithfully,

Date: _____

Signature of Gurdian