

# डा बी आर अम्बेडकर राष्ट्रीय प्रौद्योगिकी संस्थान

## Dr B R AMBEDKAR NATIONAL INSTITUTE OF TECHNOLOGY

### जी टी रोड बाईपास, जालन्धर—१४४०११, पंजाब

G T ROAD BYE PASS, JALANDHAR-144011, PUNJAB Centre of Training and Placement

Req	uest for	letter f	or und	ergoing	<b>Practical</b>	<b>Training</b>	in Industr	y	/ Institute.

Department/Discipline :

Name of the Student :

Roll No. :

Semester :

Name of the organization :

#### **Designation of the Contact Person:**

With complete address

(It should be Head of the HRD Department or a person responsible for training not below the rank of Manager).

**Duration / Period of Training** 

Why do you want to join this Organization for Practical Training? (Write about 50 words)

Signature of the Student

#### **Recommendation of Head of the Department**

It is recommended that the aforesaid student may be deputed to undergo Practical Training.

Dr. Sonia Chawla Head, Training Centre of Training & Placement