**ON DUTY APPLICATION FOR INTERNSHIP**

**Date of Application:**

|  |  |
| --- | --- |
| **Student Particulars** | |
| Name |  |
| Register Number |  |
| Semester / Year |  |
| Mobile No. |  |
| Email id |  |
| **Details of the Organization** | |
| Name of the Organization |  |
| Name of Contact Person & Designation |  |
| Mobile Number |  |
| Email id |  |
| Nature of Work during Internship |  |
| **Details of On Duty period** | |
| Duration of Internship |  |
| No of days OD requested |  |
| Dates of OD requested |  |
| OD availed already during the semester |  |
| Student Signature with date |  |

**Note : Internship offer letter should be attached.**

**Placement In-charge / Class In-charge Internship In-charge HOD, IT**