



**SRM INSTITUTE OF SCIENCE AND TECHNOLOGY, TIRUCHIRAPPALLI  
CAMPUS**

**Undertaking by the Parent**

I ....., F/o / M/o. of  
..... Reg No:.....studying in the Dept. of  
Electronics and Communication Engineering at SRM Institute of Science and Technology  
– TRC fully aware of the participation of my ward in the Industrial Visit Programme  
between 14.09.2023 (10.00 P.M.) and 16.09.2023 (05.00 A.M.).

I assure you that He / She will exhibit good behaviour and be obedient to the  
accompanying faculty members and also during the Industrial visit to Radio Astronomy  
Centre, Ooty, Tamilnadu

He / She will not participate in any activity that will breach the scope of the Mentor  
during the Industrial visit. He / She will also abide by the rules and regulations of the  
institution.

As a parent, I am also aware that He/She is participating in the Industrial Visit to  
Ooty at our own risk and we will not hold SRM Institute of Science and Technology – TRC  
responsible in any way in case of any eventuality and my ward will be solely responsible  
for his / her safety.

Name:

Signature:

Date: