

Date:

To  
The MSc IT Coordinator  
DA-IICT, Gandhinagar 382007 (Gujarat)

We hereby agree to accept the following student: Name: \_\_\_\_\_  
Registration No.: \_\_\_\_\_ for his/her final year MSc project in our  
organization for a period of \_\_\_\_\_ (about 16 weeks) starting from  
\_\_\_\_\_.

The details of the on-site supervisor who would look after the project work of the student and  
interact with DA-IICT (MSc IT coordinator) are as follows:

Name: \_\_\_\_\_

Contact Office Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone No. (office): \_\_\_\_\_

Mobile: \_\_\_\_\_

Email address: \_\_\_\_\_

Declaration: We have read and understood the guidelines provided by DA-IICT regarding an  
off-campus MSc Project, and we will fulfill the prescribed project requirements. The student  
will be allowed to travel to DA-IICT whenever required for evaluation purposes on the  
prescribed dates.

Remarks, if any

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Sincerely,

(Signature)

(Name and Designation of Signing Authority) (Seal of the Organization)