Please fill all information in CAPITAL LETTERS

1. **STUDENT INFORMATION**

Student Name- MAYANK TOLA

Enrolment No -U101116FCS067

Branch- CSE

Batch -2016-20

Postal Address – F-42 INDUSTRIAL AREA, PILANI, RAJASTHAN

PIN-333031

Student contact no. (M)=+91 9414402867

Father’s contact no- +91 9829199955

Primary Email Id –tolamayank546@gmail.com

Alternate Email Id-mayank.tola@st.niituniversity.in

1. **ASPIRATION**

Dear Student,

Greetings!!!

Kindly indicate your preference on the Career Aspiration plan to pursue after you complete your Industry Practice. Tick (✓) the appropriate choice:

Self Start-up

Higher Studies

Self-Arranged Placement

PLACEMENT ASSITANCE FROM UNIVERSITY

Others

Specify

**Note:** We recommend you give only one Career Aspiration. In case, you have more than 1 aspiration, your 1st aspiration will be taken into consideration and given more weightage.

**Date: Place: (Name & Signature of the Student)**

**----------------------------------------------------------------------------------------------------------------------------------------**

**14/03/20 Delhi Mayank Tola**

