



INDUSTRIAL TRAINING NOTIFICATION FORM

Student's Name :

PRADIP DHAKAL

Student's Matric No.:

041902900047

Postal Address :

44600

Email Address:

dhakalpradeep238@gmail.com

H/P :

Company's Name and Address :

ITArrow PVT LTD

Tel :

9801060076

Fax :

Student's Signature :

Date:

To be filled by field supervisor:

I certify that the above named student has registered for the industrial training at our organization commencing from:
_____ to _____

Name :

PRAKASH KUSHWAHA

Designation :

DIRECTOR

E-mail :

prakash@itarrow.com

Tel :

9801060076

H/P :

Field Supervisor's signature and stamp :

Date: 4/28/2022