Training & Project Announcement Form
Phone: 02717-241906 [Direct] Board: 02717-241911-14 [Ext: 141]
Email: iiicell@nirmauni.ac.in URL: www.nirmauni.ac.in

Please fill in the details in BLOCK LETTERS only

Name of the Institute	Institute of Technology				
Roll Number	19BCE245	**Name of the Student**	Surname	Name	Fathers Name
Project / Training Required for Semester:	6		SHAH	AAYUSH	UMESHBHAI
Branch	CSE			Date of Application	MAY 1, 2022
Training / Project Duration	6 WEEKS				
Address *Permanent Only*	C-104 SAARTHI FLATS, OPPO. MADHAV TOWER, SUBHANPURA, VADODARA -390023	**Project (&/or) Training Title** *[If any]*			
Pin code	390023	AD MANAGEMENT THROUGH COMPUTER VISION			
Phone: [Mobile]	+91 6353585599				
Phone: [Landline]					
Email ID	SHAHAAYUSH349@GMAIL.COM				

Organization / Company Information where the training / project to be taken

Name of the *Organization / Company*	BARODAWEB		
Address of *Organization / Company*	305-DARPAN APARTMENT, NEXT TO EXPRESS HOTEL, ALKAPURI, VADODARA - 390 005 GUJARAT, INDIA.		
Contact Person's *Name*	RUPESH SHAH	Contact Person's *Designation*	CEO OF THE COMPANY
Phone: [Mobile]	+91 9824091021	Fax No.	
Phone: [Landline]		Email ID	RUPESH@BARODAWEB.NET

Kindly issue me the **REQUISITION LETTER** for my training / project need.

Signature of the Student

**Signature of HOD / Section Head /
Dept. III Cell Faculty Coordinator**