APPENDIX D

INDUSTRIAL TRAINING - PLACEMENT AGREEMENT FORM

*(Should be completed and returned to your department for approval and confirmation **within two weeks** of placement commencement).*

Student No : | I | M | / | 2 | 0 | 2 | 0 | / | 0 | 3 | 4 |

Surname : | S | U | T | H | A | R | S | H | O | N | | | | | | | | | | |

Initials : | S | | | | | | | | | | | | | | | | | | | |

First Name : | A | B | E | V | A | R | Z | E | N | E | | | | | | | | | | |

Address : | 2 | 7 | / | 1 | , | V | I | D | Y | A | L | A | Y | A | M | | R | D | |

| T | R | I | N | C | O | M | A | L | E |

Home No : | 0 | 2 | 6 | 2 | 2 | 2 | 1 | 6 | 0 | 7 |

Mobile No : | 0 | 7 | 1 | 8 | 5 | 5 | 2 | 0 | 9 | 3 |

Email : | a | b | e | v | a | r | z | e | n | e | s | @ | g | m | a | i | l | . | c | o | m |

Company Name: ....Connex Information Technologies...

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Address: ....No.286 R. A. De Mel Mawatha, Colombo 00300...

....

Industrial Training Advisor's Name: ......Mr. Shamal Abeyaratne.................................

Phone No : ……077 770 5187………….   Fax No: ……………………………….

Email   : ……abeyrathneshamal@gmail.com…………….
If available, please attach business card of ITA to this form.

Date of Commencement   : | 0 | 1 | - | 0 | 8 | - | 2 | 0 | 2 | 4 | (dd/mm/yyyy)

Date of Completion   : | 3 | 1 | - | 0 | 1 | - | 2 | 0 | 2 | 5 | (dd/mm/yyyy)
(Anticipated)

Workdays: <mark>Mon</mark> / <mark>Tues</mark> / <mark>Wed</mark> / <mark>Thurs</mark> / <mark>Fri</mark> / Sat / Sun (Please Circle)

Mode of work: onsite /   online /   hybrid
If hybrid, mention the days working online and onsite:
……………………………… onsite ……………….…………………………………

Duration of the Internship: 6 months /   1 year

Please indicate any periods you plan to be on leave from placement, [Final Year Project, Presentation, Lectures and etc.]

_____6 months _____

1. Main Aims / Tasks of the Potential Placement

- Assist in the design, development, and ongoing maintenance of software applications to meet project requirements and company goals.
- Engage with the technologies, tools, and programming languages used within the company, gaining practical experience and building proficiency.
- Work closely with software engineers, designers, and project managers to understand project specifications and effectively contribute to team objectives.
- Identify and resolve software bugs, write and execute test cases, and ensure that the software meets the highest quality standards.

2. What Are Your Anticipated Learning Goals?

- Deepen your knowledge in key programming languages, frameworks, and tools prevalent in the industry.
- Learn about the various phases of the SDLC, including requirements gathering, design, implementation, and maintenance.
- Gain practical experience by working on real projects, understanding project management practices, and making meaningful contributions.
- Strengthen your ability to tackle practical challenges and tasks, fostering critical thinking and problem-solving expertise.

3.Potential Strengths of the Learning Situation

- Gain hands-on experience and a deeper understanding of software development by working on real-world projects.
- Benefit from access to experienced mentors and peers who can provide valuable guidance, constructive feedback, and ongoing support.
- Learn about the latest industry practices, tools, and technologies that align with your career aspirations.
- Build meaningful connections within the industry, paving the way for future career opportunities.

4. Potential Difficulties of the Learning Situation

- Embrace the challenge of learning and integrating new technologies and workflows, recognizing that it may take time to adjust.
- Manage multiple tasks and deadlines by developing effective time management and organizational skills.
- Take the time to understand and adapt to the company's culture, communication styles, and team dynamics
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5. Nature of Supervision Provided

On Site Supervision

If the supervision is being provided on site   : |_Y_/_N_|

How often will supervision sessions be held?   : Daily / Weekly / Fortnightly / Monthly

What is the approximate length of the session? : ………… 1 hour ………………….

6. Other Action Required at This Stage (Optional)

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SIGNED   Student: ………   ………………...

Industrial Training Advisor ……………………………

Submitted Date |___|___|___|___|___|___|___|___|___|