

# INDUSTRIAL TRAINING COORDINATING CENTRE

## UNIVERSITY OF IBADAN, IBADAN



### **SIWES JOB REPORTING FORM (IT-UI-014)**

<i>SURNAME</i>	<i>OTHER NAMES</i>	<i>SESSION</i>
Adegbokun	Obaloluwa Stephen	2024/2025
<i>MATRIC NO.</i>	<i>COURSE OF STUDY</i>	<i>LEVEL DURING TRAINING</i>
230875	Computer Science	400
<i>TELEPHONE</i>	<i>NAME OF COMPANY</i>	<i>COMPANY ADDRESS</i>
08109696183	Fidelity Bank Plc.	2, Kofo Abayomi Street, Victoria Island, Lagos State.

DATE REPORTED FOR TRAINING: \_\_\_\_\_

NAME AND TITLE OF IMMEDIATE SUPERVISOR: \_\_\_\_\_

TEL. NO. OF SUPERVISOR: \_\_\_\_\_

EMAIL ADDRESS OF SUPERVISOR: \_\_\_\_\_

EMAIL ADDRESS OF ORGANIZATION: \_\_\_\_\_

ASSIGNED DEPARTMENT/UNIT IN ORGANIZATION: \_\_\_\_\_

RESIDENCE ADDRESS DURING INDUSTRIAL TRAINING: \_\_\_\_\_

NEXT OF KIN DURING INDUSTRIAL TRAINING

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TEL: \_\_\_\_\_

MONTHLY ALLOWANCES (IF ANY): \_\_\_\_\_

OTHER REMARKS: \_\_\_\_\_

\_\_\_\_\_  
**STUDENT SUPERVISOR'S SIGNATURE**

\_\_\_\_\_  
**DATE AND OFFICIALSTAMP**

**THIS FORM SHOULD BE UPLOADED TO THE INDUSTRIAL TRAINING PORTAL WITHIN THE FIRST TWO WEEKS OF TRAINING. FAILURE TO UPLOAD IT IS REGARDED AS NON-PARTICIPATION IN THE PROGRAMME.**