[Date]

[Institution Name]

[Address]

Subject: Consent for Internship Participation

Dear [Relevant Contact Person],

I, [Parent's Full Name], am the parent/legal guardian of [Student's Full Name], a student at [Student's Institution] and a participant in the internship program offered by [Internship Organization].

**I hereby give my full consent for my child to participate in the internship program as outlined below:**

* **Internship Title:** [e.g., Summer Internship Program]
* **Internship Location:** [e.g., Thrissur, Kerala]
* **Internship Duration:** [Start Date] to [End Date]
* **Purpose of Internship:** [Brief description of internship goals]

I understand that my child will be working under the supervision of [Supervisor's Name/Title] at [Internship Location].

I also acknowledge that the internship will involve [Brief description of activities/tasks].

Furthermore, I am aware that [Institution/Organization] is not responsible for any accidents, injuries, or incidents that may occur during the internship program. I understand that it is the responsibility of the parents/guardians to provide necessary healthcare and safety measures for their child during the internship.

I agree to indemnify and hold harmless [Institution/Organization] from any claims or liabilities arising from my child's participation in the internship program.

I have read and understand this consent letter and agree to all its terms and conditions.

Sincerely,

[Parent's Signature] [Parent Name]

[Parent's Phone Number]

Student's Signature: [Student's Printed Name]