

To

The MSc IT Coordinator  
DA-IICT, Gandhinagar 382007 (Gujarat)

Date:

We hereby agree to accept the following student: Name: \_\_\_\_\_  
Registration No.: \_\_\_\_\_ for his/her final year MSc project in our  
organization for a period of \_\_\_\_\_ (about 16 weeks) starting from  
\_\_\_\_\_.

The details of the on-site supervisor who would look after the project work of the student and  
interact with DA-IICT (MSc IT coordinator) are as follows:

Name: \_\_\_\_\_

Contact Office Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone No. (office): \_\_\_\_\_

Mobile: \_\_\_\_\_

Email address: \_\_\_\_\_

Declaration: We have read and understood the guidelines provided by DA-IICT regarding an off-  
campus MSc Project and we will fulfil the prescribed project requirements. The student will be  
allowed to travel to DA-IICT whenever required for evaluation purposes on the prescribed dates.

Remarks, if any

\_\_\_\_\_

Sincerely,

(Signature)

(Name and Designation of Signing Authority) (Seal of the Organization)