

 Estd : 1984	KONGU ENGINEERING COLLEGE (Autonomous) PERUNDURAI – 638060 INTERNAL QUALITY ASSURANCE CELL Field Visit - Semester Report	
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Department of _____

Programme: _____ Academic Year: _____

S.No	Class and Section	Subject code and name	Name and Address of the Industry	Type of the Industry	Area of specialization	Date of the Visit	Names of the Accompanying Faculty	Reports submitted (YES/NO)
1.								
2.								
3.								
4.								
5.								

IV/IPT Coordinator

HOD

CCO-HIPC

Principal

 Estd : 1984	KONGU ENGINEERING COLLEGE (Autonomous) PERUNDURAI – 638060 INTERNAL QUALITY ASSURANCE CELL Field Visit Approval Form	
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DATE:

FROM TO

IV/IPT Coordinator,
 Department
 Kongu Engineering College,
 Perundurai , Erode.

The Principal
 Kongu Engineering College
 Perundurai , Erode.

Respected Sir ,
 Sub : Request for Field Visit - Reg.

I/We propose to have our Field Visit programme on(date). We have received permission from the company to facilitate this visit, which will support and enhance real-time learning for the participants.

Name of the Company with Address	Area of specialization	Date & Time of Visit	Subject(s) Code and Name(s)	Names of the Accompanying Faculty	No. of Students going for visit
					Boys: Girls:

I/We, on behalf of _____ class, request you to kindly grant permission for the Field Visit.I/We assure you that I/ we will adhere to the rules and regulations of both, our College and the Company.

Thanking you,

Yours,

Enclosures:

- 1) Copy of Company's Permission Letter(s) / Mail copy
- 2) List of Students (participants)

IV/IPT Coordinator**HOD****CCO-IIPC****Principal**

Note:

- 1) Class Representatives should inform about the Field Visit to all the Staff members who are having classes on the days of Field Visit.
- 2) Class Representatives should submit report about their Visit to the department. The report should have certain information regarding persons contacted, observations during the Visit, usefulness, geo tagged photo and relevance of the Visit etc.