PT-01, Rev.0, 01.09.2023



#### KONGU ENGINEERING COLLEGE

(Autonomous)
PERUNDURAI – 638060
INTERNAL QUALITY ASSURANCE CELL



# List of Companies visited

Department of\_

	Academic Year:					
S.No.	Company Name and Address	Type of the Company (Core/IT/ITES others)	Date of Visit	No of Students Attended	No of Students Selected	
		110	<b>9</b>			



# KONGU ENGINEERING COLLEGE

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**List of Eligible Students (Passing out Batch-wise)** 

Department of\_

		•	Acadei	nic Year:
S.No.	Roll No.	Name of the Student	Passing Out Year	CGPA
				1
		• ( ) ) ,		
	<b>X</b>			

Placement coordinator HOD



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### **Training Details**

Department of\_

		Academic Year:						
Sl.No	Name of the Skill Enhancement programme ( Soft skills, Language and communication skills, Core Training etc.,)	Year/Semester	Number of students Enrolled	Date of the Training Program  From To		Number of Days	Name of the agencies/consultants involved with contact details, if any	
1.								

**Placement coordinator** 

HOD

<sup>\*</sup>Any Unplanned Training may also be recorded

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## **Internship Details**

Department of\_

			-			Academic Year:			
S. No.	Roll No.	Name of the Student	Name of the Company	From Date	To Date	Number of days	Stipend Details	Only Internship	
							V	Internship with Job	
1.									

**Placement Coordinator** 

HOD

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INTERNAL QUALITY ASSURANCE CELL



#### **Placement Record**

Department of \_\_\_\_

**Academic Year:** Passing out Batch:

Name of the Program:

Sl. No	Roll Number	Name of the Student	Student Contact Details		Type of the Company	Name of the	Pay package at the time of	
			Designation and Address		one mber	(Core/ software/ others)	Company	appointment

Placement Coordinator
HOD