



Industry Consultancy/Testing Identification Report

Department of

Academic Year:		Semester:	Odd/ Even
1. Date	:		
2. Industry	(Address / email / Ph. No. / Fax No.)		
3. Person Contac	eted:		
4. Visited By:			
6. Areas Identifie	ed		
7. Specific Job /	problem		
S. No.	Follow up actions	Responsibility	Target Date

Coordinator HOD

Copy to Chief Coordinator IIP Cell





MoU List and Activity Record

	Department of
Academic Year:	Semester: Odd/ Even

S.	Name of the	Date of	Du	ration	No. of	Activities	Number of
No	Institute/Organization /Industry	MoU	From	То	Years		student/faculty participated
1.							
2.							
3.							
4.							
5.							

Note: Participant list, Report and Geo tagged photo to be attached for each activity.

Dept IIPC Coordinator

HOD





Consultancy/Test Report

Department of _____

Acade	mic Year:		Semester: Odd/ Even				Odd/ Even	
S.	Name(s) of the	Nature of the	Name of the	Month,	Revenue	GST	Total	В

S. No	Name(s) of the Faculty, Designation,	Nature of the consultancy / Testing work	Name of the Company with address and contact details	Month, Year, & Duration of the consultancy	Generated in Rs.	in Rs.	Amount in Rs.	Bill No.& Date
1.								
2.								
3.								
4.								
5.								

• Note: Beneficiary letter

Dept IIPC Coordinator

HOD

Semester: Odd/ Even

HOD



Academic Year:

Separate participants List to be maintained

Dept IIPC Coordinator

KONGU ENGINEERING COLLEGE (Autonomous) PERUNDURAI – 638060 INTERNAL QUALITY ASSURANCE CELL



Industry Training / Self-Supporting Programmes Organized

Department of_

S. No.	Name of the Faculty Coordinator(s) with designation & dept	Title of the Training Programme	Date(s)	Name of the Company with address and contact details	No. of. Participants	Revenue Generated in Rs.	GST in Rs.	Total Amount in Rs.	Bill No. & Date	Availability of the Report with Geo tagged Photos & beneficiary letter (Y/N)
1.										
2.										
3.										
4.										
5.										





Industrial Visit Permission Letter

Department of	of
Ref: KEC/PAT/PIVJ/	Date:
То	
Dear Sir.	
Sub: Permission for Ind	ustrial Visit - reg.
As you may be aware, Kongu Engineering C Institutions in TamilNadu and known for its excellent r The college offers Bachelor degree courses inCourses in Master Degree. The state-of the excellent climate for the all round development of the state-of the state-of-of-of-of-of-of-of-of-of-of-of-of-of-	ecord in academics and co-curricular activitiesbranches of Engineering and -art facilities and competent faculty provide an
As a part of the curriculum, the students are r industries of repute. We feel it will be fruitful that the glimpse of the industry in order to have a better apprecia	ne students with academic background have a
In the above background, we would likebranchyear acco	
I request you, to kindly accord the necessary guiding the students.	permission for the above visit and arrange for
We assure you that our students will of prescribed by your company for the visitors and company during their visit.	
We shall be grateful for a favourable response.	
Thanking You,	Yours faithfully,

CCO-IIPC





Esta . 1904	Industrial Vis	sit Approval Form	
	Depart	tment of	•
DATE:			
FROM	ſ	TO	
Sem Kongu	Class Representatives,Branch I Engineering College, durai, Erode.	The Principal Kongu Engir Perundurai, Erode.	neering College
Respected Sir	, Sub : Request for Industr	rial Visit - Reg.	
		ame on(da es for the Visits as per the following so	
SL.No. Con of Visit	npany's Name	Place	Date &Time
schedule.		indly grant permission for the I.V. a	
Company(s).			
	Thanking you sir,		
		Yours obedie Class Representatives	•

Enclosures:

- 1) Copy of Company's Permission Letter(s)
- 2) List of Students with signatures
- 3) Schedule of visit with signature of accompanying staff member(s)

Class Advisor IV/IPT Coordinator Principal HOD CCO-IIPC

Note:

- 1) Class Representatives should inform about the Industrial Visit to all the Staff members who are having classes on the days of I.V.
- 2) Class Representatives should submit report about their Visit to the department through Placement Cell. The report should certain information regarding persons contacted, observations during the Visit, usefulness and relevance of the Visit etc.
- 3) Students, who are not going to the Visit, should give their attendance to the Department.





Industrial Visit Declaration By Students And Parents

Dei	partm	ent c	\f
$\mathbf{D}_{\mathbf{C}}$	vai uii	CHU (<i>,</i> ,

DATE:

INDUSTRIAL VISIT DECLARATION BY STUDENTS AND PARENTS

I		.Roll.No				
Class Dej	otwis	sh to state that	I am part	ticipatin	g in	the
Industrial Visit (I.V.)	to		ar	ranged	by	the
college on	(date(s	s)) on my own	interest.	I will a	bide	by:
the rules and regulation	ons stipulated by	y the college	and I	will ol	ey	the
instructions of the accon	npanying staff me	ember.				

I am conscious that I am solely responsible for my safety and security during the Visit and I undertake to conduct myself accordingly to ensure the same. I further confirm that I am participating in the I.V. with the knowledge and concurrence of my parents.

PARENT'S SIGNATURE

STUDENT'S SIGNATURE





CCO-IIPC

Industrial Visit Report

Department of _____

Programme:		Branch:		Academic Year:		
S.No	Class and Section:	Name and Address of the Industry	Date of the Visit	Type of the Industry	Reports submitted (YES/NO)	
1.						
2.				A		
3.						
4.						
5.						
			A			

HOD

Coordinator

^{*}Report to be submitted for each IV

Class and Section:



Programme:

Branch:

KONGU ENGINEERING COLLEGE (Autonomous) PERUNDURAI – 638060 INTERNAL QUALITY ASSURANCE CELL



In Plant Training Report

Department of

Academic Year:

S. No	Roll No	Name	Name and Address of the Industry	Dates and No of Days of the Visit	Type of the Industry	Technical presentation (YES/NO)	Skills Acquired
1.							
2.) Y	
3.							
4.							
5.							

Coordinator	HOD	CCO-IIPC

^{*}Report to be submitted for each Student