

Office of International Relations Indian Institute of Technology Kharagpur

NoC For International Internship

Section A: Applicant details (to be filled in by student)				
Name:				
Roll Number:			Degree enrolled in:	
Department/ School/ Centre:			Expected date of graduation:	
Proposed internship details (to be filled in by student)				
Host Organization				
Full address				
Internship Title				
Start date of internship:			End date of internship:	
I am using this form for:				
Signature of student with date:				
Section B: Departmental Approval (to be filled in by Dept./ School/ Centre)				
Faculty Advisor (signature with date):				
Head of Dept/ School/ Centre (signature with seal and date):				