



CENTRE FOR INNOVATION

STUDENT ON DUTY REQUISITION FORM

Academic Year: 202_ - 202_

Date of Intimation : _____

Name of the Student (s)	
Department	
Register Number(s)	
Year / Semester / Section	
Number of Days & Date	_____ & From _____ to _____
Name & Designation of the Mentor	
Reason for OD (Event Name and Venue)	
Contact Number of the Student	
Signature of the Student (s)	

***** For Office Use Only*****

No. of ON DUTY	Eligible:	Availed :	Balance:
Signature of the Mentor & Class Advisor			
Signature of the Dept. Innovation Head			
Signature of the HOD			
Office CFI		Signature of the Dean (Innovation)	

VISION of the Institution:

To be recognized as a premier institution, grooming students into globally acknowledged engineering professionals.

We will achieve the MISSION of the Institution by:

- M1: Providing out come and value based engineering education
- M2: Nurturing research and entrepreneurial culture
- M3: Enabling students to be industry ready and fulfill their career aspirations
- M4: Grooming students through behavioral and leadership training programs
- M5: Making students socially responsible