

REQUEST FOR ENGAGEMENT / INTERNSHIP OF STUDENTS FROM OTHER INSTITUTION / COLLEGES

Name of the student (In capital)	
Address	
Roll no, Course & Year of study the student is currently	
College (in Which studying)	
Requested Internship duration	From To
Signature of the student	
Student Bank Accounts details	

Consent Letter (Bonafied Letter) from the College Should Be Attached

RECOMMENDATION OF THE PROJECT COORDINATOR

Project ID	
Stipened recommended (Minimum of Rs.6500/- for two months)	Rs. Total:
Signature of the Coordinator	
Name of the Coordinator with Seal	
Signature of the Head of the Department	

Note: Request received without the consent letter from the college will not be processed

For Office use

Provision/funds/duration available Request may be approved

SM-HR**CM-ADMIN****DEAN- IC&SR**