

## Appendices

### Appendix I: OJT Undertaking

1. Student Name:	
2. Current Address	
3. Residence Address	
4. Email ID	
5. Mobile No.	
6. Aadhar	
7. PAN	
8. Overall GPA	
9. Mode of Internship	
I confirm that I agree with the terms, conditions, and requirements of the OJT Policy Student Signature:  Date_____	
I confirm that the student has attended the OJT orientation, and he/she has met all paperwork and process requirements to participate in the OJT programme and has received approval from his/her mentor.  Sign of Head of the Department/ Department Coordinator/Mentor  Date_____	

## Appendix II: Draft Resume Template

Name

Contact Number and Email ID:

### Education

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HEI Name

Year

Degree / Specialization:

CGPA:

HEI Name: <bachelor's degree>

Year

Degree / Specialization:

CGPA:

### Internship / Work Experience

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organization Project:

Year

Brief:

### Academic Experience

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Semester

Year

Project:

Brief:

- Emphasize accomplishments that are relevant to the field
- Be specific—omit unnecessary words and sentences
- Start your sentence with an action verb, not a passive one-Use past-tense verb to show what you have accomplished Quantify results as much as possible
- Use keywords that will catch a recruiter's eye

### Other Achievements and Personal Interests

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- List other achievements also in reverse chronological order
- Leadership positions held outside your formal work environment
- Personal interests and accomplishments that will distinguish you from other applicants
- Volunteer service/Social Work

Languages known (Mention the level of Proficiency)

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Computer Proficiency (Mention the skills you possess)

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### Appendix III: organization Outreach Letter

<College/Department/Centre/Institute Letter Head>

To

The (Designation of the person addressed)

.....

Subject: Request for \_\_\_\_\_ weeks/hours OJT of Students

pursuing \_\_\_\_\_

Dear Sir/Madam,

The (Name of the College/department/centre/Institute) established in \_\_\_\_\_, is one of the leading Colleges/departments that reflects the vision of leading industrialists and educationalists. The College/department/centre/Institute has been recognized for its overall academic excellence and infrastructure<sup>9</sup>.

In view of the above, I request your good self to allow our following (no. of students) students for practical training in your esteemed organization. Kindly accord your permission and give at least one week for students to join training after confirmation.

Sr. No.	Name	Roll no.	Year	Department

The resumes of these students are attached to this letter. If vacancies exist, kindly plan for interviews for the students in the above branches.

A line of confirmation will be highly appreciated.

Yours sincerely,

OJT/Internship Coordinator/Head of Department

<Department/Centre Name and Date>

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<sup>9</sup> Each College/Department/Centre may customize the content in the main body to suit their specifications.

#### Appendix IV: Joining Letter of student

< College/Department/Centre/Institute >

To

(Designation of Person addressed)

.....

.....

Subject: Joining letter of student

Dear Sir,

Kindly refer to your letter/e-mail dated \_\_\_\_\_ on the above-cited subject. As permitted by your good self the following students will undergo OJT/ Internship in your esteemed organization under your sole guidance and direction

Sr. No.	Name	Roll no.	Year	Department

This training is an essential part of the curriculum, and the following guidelines have been prescribed in the curriculum for the training. You are, therefore, requested to please issue the following guidelines to the concerned OJT supervisor.

- Each student is required to prepare an OJT diary and report.
- Kindly check the OJT diary of the student on a timely manner.
- Issue instructions regarding working hours during training and maintenance of the attendance record

You are requested to evaluate the student's performance based on the below-mentioned parameters (we will provide you with the evaluation sheet):

Completion of Hours	Quality/Performance	Punctuality/Regularity
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The performance report may please be forwarded to the undersigned on completion of training in a sealed envelope or in an email.

Your efforts in this regard will positively enhance the knowledge and practical skills of the students, your cooperation will be highly appreciated, and we shall feel obliged.

The students will abide by the rules and regulations of the organization and will maintain proper discipline with keen interest during their OJT. The students will report to you on \_\_\_\_\_ (date) along with a copy of this letter.

Yours sincerely,

Internship Coordinator/HoD

<Department Name and Date>

## Appendix V: Student Diary (Log) Recording Format

Week	Task Assigned	Activities Performed	Key Learnings	Additional Remarks

Signature of Industry/organization Supervisor

## Appendix VI: Attendance Sheet<sup>10</sup>

<Organization Letter Head>

Name & Address of organization

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Name of the Student	
Roll Number	
Name of Course	
Date of Commencement of Training	
Date of Completion of Training	

Month and Year:

Week	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						

- The attendance sheet should remain affixed to the Daily Training Diary. Do not remove or tear it off.
- Holidays should be marked in Red Ink in the attendance column. Absent should be marked as 'A' in Red Ink.

Name and Signature of OJT Supervisor (with date)\_\_\_\_\_

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<sup>10</sup> Even in case of hybrid mode, a certificate of attendance duly signed by the OJT Supervisor needs to be submitted.

## Appendix VII: Supervisor Evaluation of OJT Student<sup>11</sup>

<Organization Letter Head>

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

OJT Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Organization: \_\_\_\_\_

OJT Address: \_\_\_\_\_

Dates of OJT: From \_\_\_\_\_ To \_\_\_\_\_

Please evaluate the intern based on the points mentioned in the table below.

S.no.	Particular	Marks
1	<b>Completing of Hours (out of 20)</b>	
2	<b>Quality/Performance (out of 20)</b>	
3	<b>Punctuality/Regularity (out of 10)</b>	
<b>Total (out of 50)</b>		

Overall performance of student intern (circle one): (Needs improvement / Satisfactory / Good / Excellent)

Additional comments, if any:

Signature of Industry/organization supervisor \_\_\_\_\_

<sup>11</sup> Please note that this is a suggested template. However, the department may modify as per their parameters.

## Appendix VIII: Proforma for Evaluation of OJT by Institute

<Name of the College/Department/Centre/Institute>

1. Name of Student \_\_\_\_\_
2. Mob. No. \_\_\_\_\_
3. Roll No. \_\_\_\_\_
4. Branch/Semester \_\_\_\_\_
5. Period of Training \_\_\_\_\_
6. Address of Training Site/organization: \_\_\_\_\_
7. Type of Work \_\_\_\_\_  
Date of Evaluation \_\_\_\_\_  
Please rate the following:

S.no.	Particular	Marks
1	<b>Weekly Reporting (out of 15)</b>	
2	<b>Written Report (out of 20)</b>	
3	<b>Viva-Voce /Presentation (out of 15)</b>	
<b>Total (out of 50)</b>		

Additional Remarks (if any):

Signature of Faculty Mentor



## Appendix IX: Proforma for OJT COMPLETION CERTIFICATE

The student should attach OJT completion certificate, duly signed by the industry/organization supervisor to his/her report. A representative format for the OJT completion certificate is as given below:

### CERTIFICATE

(On Company/Institute Letterhead)

This is to certify that Ms./Mr. \_\_\_\_\_, has successfully completed the On-Job training in the \_\_\_\_\_, from \_\_\_\_\_ to \_\_\_\_\_ under the supervision of \_\_\_\_\_

Authorized signature

## Appendix X – Format of OJT Report

- Title of the Report: On-the-Job Training Experience Report
- Name of the Student:
- Name of the organization:
- Department/Division Where Training took place
- Duration of Training: [Start Date to End Date of Training]
- Date of Submission: [Date of Submitting the Report]

The following is a suggested outline. However, the students are advised to consult their respective OJT Mentors.

- Introduction
- Company Overview
- Training Objectives
- Training Experience
- Skills Developed
- Achievements & Contributions
- Challenges Faced
- Lessons Learned
- Recommendations
- Conclusion
- Appendices (if any)
- References

## Appendix XI: Student Feedback of OJT<sup>12</sup>

(To be filled by Students after OJT completion)

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

Industry/Organization Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Supervisor Email: \_\_\_\_\_ OJT is:   Paid     Unpaid  

Organization: \_\_\_\_\_

OJT Address: \_\_\_\_\_

Faculty Coordinator: \_\_\_\_\_ Department: \_\_\_\_\_

Dates of OJT: From \_\_\_\_\_ To \_\_\_\_\_

Give a brief description of your OJT work (title and tasks for which you were responsible): Was your internship experience related to your major area of study?

- Yes, to a large degree
- Yes, to a slight degree
- No, not related at all

Indicate the degree to which you agree or disagree with the following statements.

This experience has:	Strongly Agree	Agree	No opinion	Disagree	Strongly Disagree
Given me the opportunity to explore a career field					
Allowed me to apply classroom theory to practice					
Helped me develop my decision-making and problem-solving skills					
Expanded my knowledge about the work world before permanent employment					
Helped me develop my written and oral communication skills					
Provided a chance to use leadership skills (influence others, develop ideas with others, stimulate decision-making and action)					

<sup>12</sup> The College/Department/Centre may generate the form using Google Form.

Expanded my sensitivity to the ethical implications of the work involved					
Made it possible for me to be more confident in new situations					
Given me a chance to improve my interpersonal skills					
Helped me learn to handle responsibility and use my time wisely					
Helped me discover new aspects of myself that I didn't know existed before					
Helped me develop new interests and abilities					
Helped me clarify my career goals					
Provided me with contacts which may lead to future employment					
Allowed me to acquire information and/ or use equipment not available at my Institute					

- In the Institute OJT program, faculty members are expected to be mentors for students. Do you feel that your faculty coordinator served such a function? Why or why not?
- How well were you able to accomplish the initial goals, tasks and new skills that were set down in your learning contract? In what ways were you able to take a new direction or expand beyond your contract? Why were some goals not accomplished adequately?

- In what areas did you most develop and improve?
- What has been the most significant accomplishment or satisfying moment of your OJT?
- What did you dislike about the OJT?
- Considering your overall experience, how would you rate this OJT? (Circle one).  
-Satisfactory/ Good/ Excellent
- Give suggestions as to how your OJT experience could have been improved. (Could you have handled added responsibility? Would you have liked more discussions with your professor concerning your OJT? Was closer supervision needed? Was more of an orientation required?)

<Signature of Student>

<Name, Roll number, Date>