

**STIPEND FORM****Details of Stipend Reimbursement under the Scheme of WBL Programme  
(Level-01)**

Name of Internship: Work Based Learning Programme

Date of Commencement: 05/02/2024

Date of Completion: 04/08/2024

Sl.No.	Particulars	Details
1.	Name of the Participating Institute	C-DAC Mohali
2.	Complete Address	#631,3A Mohali sas nagar
3.	Name of the Candidate	Sonu
4.	Category (SC/ST/EWS/Women)	SC
5.	Gender	Male
6.	AICTE ID	STU659265bf064ec1704093119
7.	Mobile No	7986331463
8.	E-Mail Address	Sonugautam9699@gmail.com
9.	Technology Domain	Artificial Intelligence
10.	Joining Date	05/02/2024
11.	Bank Details with IFSC Code: (WBL Intern)	Account No=69350100005025 IFSC Code = BARB0VJMOIA Bank Name: Bank of Baroda Address: Mohali scf 127 phase 3b2 mohali

Stipend Amount	Month	No. of days Present	No. of days Absent	Duration	(Signature of Candidate)
10,000	April	31	0	01.05.2024 TO 31.05.2024	

Remarks: C.L on (9 May ,16 May , Half Day (15 May)

Seal &amp; Signature of Supervisor/Mentor

Name: Dr. Sanjay Madan

Designation: Joint Director

Seal &amp; Signature of Coordinator/PI

Name: Mr. Munish Ratti

Designation: Principal Engineer

Official Stamp of the Organization

Telephone No/Mobile No/Email

Address/Web Site

## WBL Students Attendance Sheet

Name of Participating Institute: C-DAC, Mohali

Name of Internship: Work Based Learning Programme

Starting Date: 05/02/2024

Ending Date: 04/08/2024

S/ N	Name of Candidate	May																														
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
1	Sonu	P	P	P	sat	sun	p	p	p	Cl	P	Sat	Sun	P	p	HD /Cl	Cl	P	sat	Sun	p	p	P	P	P	Sat	sun	p	p	P	P	P

- Present Days are marked as P
- Casual Leave is marked as CL
- Medical Leave is marked as ML
- Loss of Pay day is marked as A
- Half day to be marked as HD(CL), HD(ML) or HD(A)

Date: 13 June 2024

Seal & Signature of Supervisor

Name: Dr. Sanjay Madan

Designation: Joint Director

Seal & Signature of Coordinator

Name: Mr. Munish Ratti

Designation: Principal Engineer