Form P2

Ph.: 044 2747 6316

INDIAN INSTITUTE OF INFORMATION TECHNOLOGY, DESIGN AND MANUFACTURING, KANCHEEPURAM



भारतीय सूचना प्रौद्योगिकी, अभिकल्पना एव विनिर्माण संस्थान, कांचीपुरम

OFFICE OF PLACEMENT

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REQUEST FOR ISSUANCE OF NO OBJECTION CERTIFICATE FOR INTERNSHIP (FOR 8 WEEKS)

Name (as per Academic Record)							
Roll No.							
Department & Program							
Current Year			Seme	ster			
CGPA (as on date)		Backl	Backlogs				
Student's Contact No			·				
Parent's Name							
Parent's Contact No	Email ID						
Permanent Address			·	·			
Internship Duration	From	/	/	То	/_	/_	
Applying Institute/Company		I		.	1		
Stipend Amount (if any)							
Internship offering person Name & Designation							
Contact No Email ID							
Will you stay in the institute h	nostel (IIITD	M Kancheepur	am), during	the inter	nship pe	riod?	YES / NO
Note: If the student wishes Industrial Training P submit the form P4 and will be evaluated in the	rogram (I d get it ap	TP). For p	ursuing I'	ΓP, the c	oncern s	tuden	t needs to
		<u>Undertak</u>	ing				
I undertake that the above ever rules concerning on duty. I wil Institute/Company to PIC-Into Training Program if required.	ll submit th	e offer lette	r or mail c	onfirmati	on for Int	ternsh	ip from the
Date:					Signature	e of th	e Student
	Re	ecommend	ations				
Faculty Advisor Hea	ad of the De	partment	PIC –	Internshi	ip P	lacem	ent Officer

Remarks if any: