



DG 1/2, Action Area I, New Town, Kolkata, West Bengal -700156

Application No: SNU/TRNG/...../.....
For Office Use only

**FORM FOR INTERNSHIP PROGRAM / INDUSTRIAL
TRAINING / PROJECT / DISSERTATION / SEMINAR /
WORKSHOP / SHORT TERM COURSE**

Name of the Student:

Student ID: Registration Number:

Department: Program:

Year of Admission: Semester/Year: ABC ID:

Address for Communication:

Contact No: E-mail ID:

[Applying For (Tick)]

INTERNSHIP
PROGRAM INDUSTRIAL
TRAINING PROJECT DISSERTATION SEMINAR WORKSHOP SHORT TERM
COURSE

[Organization Details]

Name and Designation of the concerned Officer:

Organization Name & Complete Address (with contact details):

Time Period: From: to:

DECLARATION: I solemnly confirm that the information furnished by me is correct to the best of my knowledge and belief.

Place:

Date:

.....
Signature of the Candidate

*For Office Use Only
-Approval-*

.....
(Signature with Date)

.....
(Signature with Date)

Name:.....
[Head of the Department]

Name:.....
[Office of the COE]

Application No: SNU/TRNG/...../.....

Receipt copy (to be filled by the Officials)

**FORM FOR INTERNSHIP PROGRAM / INDUSTRIAL TRAINING / PROJECT / DISSERTATION / SEMINAR / WORKSHOP /
SHORT TERM COURSE**

Name of the Applicant:

Student ID: Registration Number:

Program:

.....
Received by (Name)

.....
Signature with Date

.....
Reporting Date & Time