



SNU
SISTER NIVEDITA
UNIVERSITY

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:
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)

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

.....
(Signature with Date)

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
