<u>Internship at IIITDM Kancheepuram</u> (to be submitted by Students from outside IIITDM Kancheepuram)

1.	Title of the project/event under which internship is sought at IIITDM Kancheepuram:		
2.	Period of the internship: From	_ To No. of Days:	
3.	Student Details:		
	(a) Student's Name:	(b) Year of study:	
	(c) Name of Degree Programme:		
	(d) Roll/Registration Number:	(e) Department:	
	(f) Name of the Institute with Complete Address:		
4.	Fees to be paid by the student (if any):		
5.	Stipend / fellowship expected to be received by the student during this internship (if any):		
I am interested to participate in the above mentioned event at IIITDM Kancheepuram and I certify that the information I have written on the application are true and accurate.			
		Signature of the Stud	ent
The student is permitted to join the internship, if selected at IIITDM Kancheepuram.			
		Head of the Institut	ion
		(Signature with Designation and Da	

INSTITUTE/UNIVERSITY/COLLEGE SEAL