



Application form to be submitted by IIITDM Students
for Joining as Intern within the Institute

1. (a) Student's Name:
(b) Roll Number: (c) Department:
2. Academic details: (a) CGPA: (b) Number of backlogs (if any):
3. Title of the project/educational/training event:
4. Period of the event: From _____ To _____ No. of Days:
5. Time-slot in a day:
6. Fees to be paid by the student (if any):
7. Stipend / fellowship expected to be received by the student during the internship (if any):
8. Details of other fellowship(s) currently availing by the student (if any):

I am interested to participate in the above mentioned event and I certify that the information I have written on the application are true and accurate.

*Signature of the Student

Recommendations

Faculty Advisor

HoD

PERMITTED / NOT-PERMITTED

JR-Academics

Dean-Academic

*After getting permission from Dean-Academics, student shall submit this form to the event organizer