



INDUS INTERNATIONAL UNIVERSITY

Sponsored by Kartha Education Society(Mumbai)

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*Creating futures,
Changing lives*

Internship/Training Request Form

Name of Student <input type="text"/>	Father/Mother's Name <input type="text"/>
Student ID & Year <input type="text"/>	Name of Guardian <input type="text"/>
Program of Study <input type="text"/>	E-mail <input type="text"/>
Area of interest for internship <input type="text"/>	Address & Contact no. <input type="text"/>
Location preference for internship <input type="text"/>	

Detail of Organization

Name of Organization <input type="text"/>	
Name of Contact Person <input type="text"/>	E-mail <input type="text"/>
Address & Contact no. <input type="text"/>	

I would request University to kindly make arrangement for internship. I shall, however, feel obliged if the University allows me to undertake internship in the Company/Organization, the particulars of which are given above; and I agree to all terms & conditions of University as well as the company failing which, I am liable for suitable action.

Signature of Guardian

Signature of Student

For Office Use

This Student has passed all the subjects till the end of 2nd / 4th / 6th Semester. He is eligible for the above training/internship. He/she has no disciplinary cases against him/her and has black point within permissible limit.

Signature of
Examination Controller

Academic Approval

Signature
Head of Department

Signature of Dean