# **Techno College of Engineering Agartala**

Maheshkhola, PO: Anandanagar, Tripura (W) PIN: 799004



**Training & Placement Cell** 

# **Internship Policy: Forms I-VII** With Effect from Academic Year 2022-2023

Student internship program application format

#### Form-I

Form-I					
To The Training & Pla T&P Cell	acement Officer,				Office use only Ref. No:
	Engineering Agartal	la			
Subject: Prayer for	r granting permission	n for undergoing	(company name		) training into
Sir,					
I beg most respectf	ully to state that I/w	e, am/are student (s)	of	De	partment,
Semester	, Academic Session		want(s) to undergo S	ummer/winter tr	aming as per details
	Organization Name	:			
2. Address o	f Training Company	//Organization			
3. Contact p	erson in company.				
5. Email id.	Of Contact person:				
				(s)	
	Of Students(s):				
			(Yes/N	(o)	
9. Type of T	raining:	(online/offline)			
	aining:				
11. Whether p	permission of HOD of	of Department attache	ed: (Yes/No)	)	
Detail of Student A	applicant (s):				
Sl. No.	Name	TU Roll No.	Branch	Semester	Mobile No.
1					
2					
Email id of applica	nt (any one):				

#### Form-II

### Parent/Guardian Consent Form—Internship

Please complete all blanks and sign in *three* places.

Student's Name:	Branch:
TU Roll No:	Semester:

#### **Part I: Permission to Participate**

I have read the information concerning the internship program and give my son/daughter,

\_\_\_\_\_\_, permission to participate in the program. I realize that each student must provide his/her own transportation to and from the internship workplace site. I also understand that my son/daughter must meet the application requirements to be accepted into the program.

Date

#### Signature of Parent/Guardian

#### **Part II: Emergency Authorization**

In the event that I cannot be reached in an emergency, I give permission to the staff of the college or the internship workplace supervisor to secure proper treatment for my son/daughter.

Contact No.:

Alternative contact in case of emergency:

Date:

#### Signature of Parent/Guardian

#### Part III: Liability

I hereby agree to waive and release any and all rights that I, my ward, or our representatives may have to make claim against College or their respective officers, employees, or representatives arising from injury or damages, including lawyer's fees, that may result from my ward's participation in the internship program.

I further agree to indemnify and hold harmless the college or their respective officers, employees, or representatives from any claims, including lawyer's fees, which I or my ward might make or which might be made on my or our behalf by others, or which might be made against me or my ward by others, arising from my ward's participation in the internship program.

Signature of Parent/Guardian

Date:

#### Form-III

#### **Student Joining Letter Format**

To,

The HOD

\_\_\_\_\_ (Department)

Techno college of Engineering Agartala

Subject: Internship joining report.

With reference to acceptance of internship by (<u>Name of the industry/organization</u>) through letter/email dated\_\_\_\_\_\_, I hereby pleased to communicate you that I have joined as Internee on \_\_\_\_\_\_. Initially I have been posted in \_\_\_\_\_\_ department. During this Internship, my contact number will be \_\_\_\_\_\_ and e mail id will be \_\_\_\_\_\_. Moreover, I will be forwarding fortnightly report stating my periodical learning and experiences.

Thanking you,

Regards,

Name of the student with signature)	
ГU Roll NO:	
Branch:	
Semester:	
Academic Year:	

\*\* Note: This letter to be submitted by the student to HOD of their respective department through Departmental Faculty Coordinator before joining the Training/Internship.

#### Form-V

# Student Daily Diary (Log) Recording Format

Nam	e of Studer	nt:	TU Roll No:		Branch:		
Name of Industry							
Supe	rvisor:						
Emai	il id of Sup	ervisor:					
Sl. No.	Date	Time of Arrival	Time of Departure	Name of finished Job	Remarks	Signature of Industry Supervisor	

#### Form-VI

## **Format for Supervisor Evaluation of Intern**

Student Name:	Date:
Work Supervisor:	Title:
Company/Organization:	
Internship Address:	
Dates of Internship: From	То

Please evaluate intern by indicating the frequency with which you observed the following behaviors.

Overall performance of student intern (Tick one):

\_\_\_\_\_

Parameter	Needs	Satisfactory	Good	Very	Excellent
	Improvement	(2)	(3)	Good (4)	(5)
	(1)				
Attendance & General Behavior					
Initiatives & Efforts in Learning					
Knowledge & Skill Improvement					
Time utilization and Professional Attitude					
	Attendance & General BehaviorInitiatives & Efforts in LearningKnowledge & Skill ImprovementTime utilization and Professional	Improvement (1)Attendance & General BehaviorInitiatives & Efforts in LearningKnowledge & Skill ImprovementTime utilization and Professional	Improvement (1)(2)Attendance & General BehaviorInitiatives & Efforts in LearningKnowledge & Skill ImprovementTime utilization and Professional	Improvement (1)(2)(3)Attendance & General BehaviorInitiatives & Efforts in LearningKnowledge & Skill ImprovementTime utilization and Professional	Improvement (1)(2)(3)Good (4)Attendance & General BehaviorInitiatives & Efforts in LearningKnowledge & Skill ImprovementTime utilization and Professional

Additional comments, if any:

Signature of Industry supervisor	HR Manager
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# Student Feedback of Internship (To be filled by Students after

# **Internship Completion**)

Student Name:		Branch:
TU Roll No:	Semester:	Date:
Industrial Supervisor:		Title:
Supervisor Email:		Internship is: Paid / Unpaid
Company/Organization:		
InternshipAddress:		
Faculty Coordinator:		Department:
***Please fill out the abo	ove in full detail***	
Give a brief description	of your internship work (tit)	le and tasks for which you were
responsible):	- · ·	
Was your internship exp	erience related to your majo	or area of study?
Yes, to a larg	e degree	
Yes, to a slight	t degree	

\_\_\_\_\_No, not related at all

Indicate the degree to which you agree or disagree with the following statements.

This experience has:	Strongly agree	Agree	No opinion	Disagree	Strongly disagree
Given me the opportunity					
to explore a career field					
Allowed me to apply					
classroom theory to					
practice					
Helped me develop my					
decision-making and					
problem-solving skills					
Expanded my knowledge					
about the work world prior					
to permanent employment					
Helped me develop my					
written and oral					
communication skills					
Provided a chance to use					
leadership skills (influence					
others, develop ideas with					
others, stimulate decision-					
making and action)					
Expanded my sensitivity					
to the ethical implications					
of the work involved					
Made it possible for me to					
be more confident in new					
situations					
Given me a chance to					
improve my interpersonal					
skills					

This experience has:	Strongly	Agree	No	Disagree	Strongly
Helped me learn to handle responsibility and use my time wisely Helped me discover new aspects of myself that I	agree		opinion		disagree
didn't know existed before Helped me develop new					
interests and abilities Helped me clarify my career goals					
Provided me with contacts which may lead to future employment					
Allowed me to acquire information and/ or use equipment not available at my Institute					

- In the Institute internship program, faculty members are expected to be mentors for students. Do you feel that your faculty coordinator served such a function? Why or why not?
- How well were you able to accomplish the initial goals, tasks and new skills that were set down in your learning contract? In what ways were you able to take a new direction or expand beyond your contract? Why were some goals not accomplished adequately?
- In what areas did you most develop and improve?
- What has been the most significant accomplishment or satisfying moment of your internship?

\_\_\_\_\_

- Considering your overall experience, how would you rate this internship? (Tick one).

Satisfactory/ Good/ Excellent