INDIAN INSTITUTE OF ENGINEERING SCIENCE AND TECHNOLOGY, SHIBPUR (Formerly Bengal Engineering and Science University, Shibpur) TECHNICAL EDUCATION QUALITY IMPROVEMENT PROGRAMME (TEQIP – III)

PROPOSAL FOR SUMMER INTERNSHIP AT HEST SHIBPUR FOR SECOND YEAR UG EXTERNAL STUDENTS (To be submitted to the Head, Human Resource & Management, Hest Shibpur, Howrah – 711103; Email: hodhrm@iiests.ac.in)

1. Personal Details:

Name of Student	Name of the Department and Institute with address:
Mobile No.	
E-mail ID:	
Name of the Department applied for internship :	
	Student ID/Registration No.:
Place provide name of facility member of HECT as superviser along with details of concerned facility member (amail	

Please provide name of faculty member of IIEST as supervisor along with details of consent of concerned faculty member (email communication from the concerned faculty member may be attached):

2. Academic performance:			
Sl. No.	Name of Examination	Board/University	Marks (Percentage/CGPA)
1	Class X		
2	Class XII		
3	First Semester (B.E./B.Tech.)		
4	Second Semester (B.E./B.Tech.)		
5	Third Semester (B.E./B.Tech.)		

3. Have you attended any internship/training previously: Yes / No

If, yes, please attach supporting documents.

4. I hereby declare that all above information given are correct and true best of my knowledge.

Signature of the student with date

Forwarded and recommended

Signature (with seal) of the Head of the Department

For Office use only	
Forwarded to the Coordinator, TEQIP-III:	
	Recommended /Not Recommended:
	Name of the supervisor/Mentor:
[Signature (with seal) of the Head, HRM]	Department:
	[Members of the Advisory Committee, TEQIP-III]

Recommended for funding	Budgetary provision is checked	Approved
[Signature (with seal) of the Co-ordinator (TEQIP – III), IIEST, Shibpur]	[Signature (with seal) of the Nodal Officer (Finance, TEQIP – III, IIEST, Shibpur]	[Signature (with seal) of the Director / Registrar, IIEST, Shibpur]

Name of Bank	
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Name of Bank Branch including branch	
address	
Name of Account Holder (as in Bank Pass	
Book)	
Account Number	
Type of Bank Account	
51	
Bank Branch Code	
IFS Code	
MICR No.	
Phone Number of Bank Branch (if any)	
E-mail ID of Bank Branch (if any)	
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Personal Details

Name	
Department	
Registration No.	
Date of Birth	
Father's Name	
Address	
E-mail ID	
Mobile No.	
PAN Card Number*	
AADHAAR Card Number#	

* please submit a copy of PAN Card with self signature

please submit a copy of AADHAAR Card (for date of birth, father's name and address etc.) with self signature

Declaration: All information for bank and personal details given above is correct to the best of my knowledge.

(Signature of the student with date)