



भारतीय प्रौद्योगिकी संस्थान पटना

INDIAN INSTITUTE OF TECHNOLOGY PATNA

FORM FOR SUMMER INTERNSHIP PROGRAMME AT IIT PATNA - 20

Personal Information

Name:		Photograph
Date of Birth:	Gender:	
Correspondence Address:		
Phone No.:	e-mail:	
Is any disciplinary case pending against you? Yes / No (If yes attach details in separate sheet)		

Parents'/Guardian's contact information

Name		Relation	
Address			
Phone No.		Mobile No.	
e-mail			

Institute affiliation information

Name of Institution			
Address			
Degree /Programme		Semester/year	
CGPA/Marks %:			

Reference

Name				
Address				
E-mail		Ph No.		Fax No.

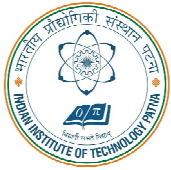
Department at IIT Patna

Department of application at IIT Patna	
Supervisor(s) Name	
Research Topic/Area	
Duration of stay at IIT Patna	
Hostel accommodation is required?	

I hereby declare that all information given above is correct. <div style="text-align: right;">Applicant's Signature with Date</div>	I hereby consent to supervise the student for the duration mentioned above. <div style="text-align: right;">Supervisor</div>
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The student is selected as summer intern under supervision of Prof. /Dr.

(Head- Department of)



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INDIAN INSTITUTE OF TECHNOLOGY PATNA

KANPA ROAD, BIHTA, PATNA-800013, BIHAR, INDIA

Ph.: + 91-612-3028103

Declaration to be submitted by Project Trainees

The undersigned do hereby declare that:

1. Mr., S/o/Dois a(class/batch) regular student of(name of Institute)
2. He is being permitted to undertakesemesters (time) project work at IIT Patna from(date) to(date).
3. The right of intellectual property generated as an outcome of this project will lie equally with both the institutes.
4. Mr.(name of the student) will abide by all the rules and regulations and adhere to the discipline of IIT Patna.
5. Mr.(name of the student) will follow ethical practices in his conduct during his entire period of stay in IIT Patna.

Signature of Student:

Name :

Address:

Contact No.:

Local Guardian(if any):

Signature of Guide/HoD/Head of Institution:

Name :

Department:

Date: