JOINING REPORT

(To be sent by student within a week of joining by Registered Post to Concerned Head of the Department, National Institute of Technology, Tiruchirappalli – 620 015).

Name of Student	:	
Roll No.	:	
Programme	:	
Name & Address of Organization	:	Telephone No. : E-mail :
Period of Training	:	From _____To_____

I hereby inform that I have joined the organization on _____ for the Internship / Industrial Training / Academic Attachment) in the industry / organization.

Date : Signature of the Student

CERTIFICATE BY THE CO-ORDINATOR IN THE INDUSTRY

Certified that the above-mentioned student has joined our organization for the INTERNSHIP / INDUSTRIAL TRAINING / ACADEMIC ATTACHMENT in the industry / Organization.

Name of the Coordinator	:	
Designation	:	
Phone No.	:	
E-mail (if any)	:	
Signature of the Coordinator		
Date		