**Sri Venkateswara College of Engineering**

**Department of Information Technology**

**Report on Internship (AY2023-24)**

|  |  |
| --- | --- |
| **Name of the Student** |  |
| **Register Number** |  |
| **Branch, Year, Semester, Sec** |  |
| **Name of the Industry, Address,** **Contact Number**  |  |
| **Duration of the Internship along with start date and end date** | \_\_\_Week(s)/Month(s)---/---/---- to ---/---/---- |
| **Summary of Internship Activity****(Attach separate sheet if necessary)** |  |
| **Outcomes of Internship mapping to the subjects with subject code** |  |

**Note: Internship certificate should be attached**

**Signature of the student Signature of the Faculty Advisor**

**Signature of the DCC Members Signature of the HoD**