

**2nd Floor, AU Engineering College Main Block, Andhra University,
Visakhapatnam – 530003, Andhra Pradesh, INDIA**

**APPLICATION FOR SUMMER INTERNSHIP PROGRAMME (SIP – 2023)**



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| --- | --- | --- | --- |
| Advertisement No. | IIPE/DORD/SIP/2023  |      |  Affix here recent passport size photograph |
| Applied for  | Summer Internship Programme – 2023 |
| Application Date  |   |
| How did you know about SIP at IIPE?  |   |

|  |  |  |  |
| --- | --- | --- | --- |
| 1.  | Student Name(in Block Letters) | :  |   |
| 2.  | Father’s/Mother’s Name | :  |   |
| 3. | Email ID | : |  |
| 4. | Mobile Number | : |  |
| 5. | Mobile Number of Parent/Guardian | : |  |
| 6. | Department | : |  |
| 7. | Subject Area(As per advertisement) |  |  |
| 8. | Preferred Starting date of Internship (08-05-2023 to 29-05-2023)\*Must be Monday-Friday\*Internship will for 8 weeks starting this date |  |  |
| 8. | Preferred faculty at IIPE(Subject to availability) | : |  |
| 9. | Order of Preference(Provide order of preference as 1,2,3) | : |

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   Institute-Funded

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  Project-Funded

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  Self-Funded |

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| --- | --- |
| 10. Corresponding Address:        |   |
| 11. Permanent Address:        |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 12.  | Nationality  | :  |   |
| 13.  | Gender  | :  |   |

|  |  |
| --- | --- |
| 14.  | Tick the appropriate box which you belong to the category\*: |
| SC  |   | ST  |   | OBC |   | UR  |   | *EWS* |   | *PH* |   |
| \*Please attach a suitable certificate in support of the claim from an appropriate government authority.  |

1. Educational Qualifications (Please attach self-attested copies of the Certificates):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| ExaminationPassed | Branch/ Specialization  | College/ Univ./ Institute  | Year of passing  | % / Grade  | Class/ Division  |
| 10th |   |   |   |   |   |
| 10+2 |   |   |   |   |   |
|   |   |   |   |   |   |
|  |  |  |  |  |  |

1. Other Qualifications: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. Research Publications/Poster Presentations (if any):

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| --- | --- |
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18. Conferences/Workshop attended (if any):

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| --- | --- |
|  |  |

19. Awards/Prizes (if any):

|  |  |
| --- | --- |
|  |  |

20. Contact Information of one/two Referees:

|  |  |  |  |
| --- | --- | --- | --- |
|   |  | Referee 1  | Referee 2  |
| Name  | :  |   |   |
| Designation  | :  |   |   |
| Address  | :  |   |   |
| Phone No  | :  |   |   |
| Email  | :  |   |   |
| Uploaded Prescribed LOR format\*  | : | Yes/No | Yes/No |

21. Proposed Work at IIPE (200-250 words):

|  |
| --- |
|               |

1. Any other relevant Information : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Attach sheet if necessary)

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1. List of Enclosures – Checklist (Follow the same order): ✓

|  |  |  |
| --- | --- | --- |
| i)  |  Soft copy of Resume highlighting Research experience and Technical expertise (if any) \*  |  |
| ii)  |  Softcopy of Bonafide certificate from your Institute\*  |  |
| iii)  | Softcopy of 10th Marks Sheet + Certificate\*  |  |
| iv)  |  Softcopy of 10+2 Marks Sheet + Certificate\*  |  |
| v)  |  Softcopy of Grade sheet/Mark sheet till previous semester of pursuing/prior Degree\*  |  |
| vi)  |  Softcopy of Payment Receipt\*  |  |
| vii)  |  Softcopy of Caste Certificate (If applicable)  |  |
| viii)  |    |  |
|  \* Mandatory attachments and Self attested |

There are attached sheets along with this application form of 6 pages.

These attched sheets should be uploaded on Online Portal (<https://iipe.ac.in/sip>)

I have carefully read and understood the summer internship program advertisement and guidelines, and all entries in this application as well as attached sheets are true to the best of my knowledge and belief. If any part of the information given is found to be false or incorrect, I shall forfeit the claim to the internship at IIPE and will be liable to the disciplinary action

 (Signature of the applicant)

Date:

Place:

Note: Use separate sheet if necessary for any of the above items. Every attached sheet should be self-attested.

This is to certify that there is no backlog/disciplinary action pending against \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Signature of HoD with Stamp)

Date:

Place:

For Office Use only

Selected Category: Institute/Project/Self

Remarks, if any:

Signature of Selection Committee HoD Signature of Supervisor

Signature of Associate Dean (R & D)