



Centre for Converging Technologies
University of Rajasthan, Jaipur-302004

Performa for M.Tech X Semester Project/Training Work

Name:.....S/o/D/o:

Batch:Mobile No:E-mail:.....

Address:

.....Pin code:

Major Field (NBIC).....

Title of Project/Training

Name of GuidePosition:

Official address.....

.....Pin code:

E-mail.....Mobile No.:.....

Name of Head/Director of the proposed institute/Company

NamePosition:

Address.....Pin code.....

E-mail:.....Mobile No.:.....

.....
Signature of Candidate

I have the acceptance of pursuing the project work/training under said institution from Head of the Dept./Centre/Division/Organization. I understand that I will have to submit acceptance certificate in prescribed proforma for M.Tech. X semester within a week, failing which provisional permission, if given to me shall automatically stand cancelled.

Date:-

.....
Signature of Candidate

CERTIFICATE

This is to certifyis permitted to carry out his/her project work/Training under my supervision for a minimum period of 90 working days as per his/her requirement for M.Tech. X semester project work/training shall be provided the facilities needed for above.

Date:

Signature of Guide
(with seal)

Project work/training
Recommendation of Head/Director

Date:

.....to permitted to carry out his/her project work/training as mentioned above. The institute will extend facilities for the work as per recommendation of the guide/supervisor.

Signature of Guide
(with seal)

Date:

Signature of Head Director

Director, CCT

Note: It is compulsory to fill this form and get permission of Director, CCT before permitting on the