

Annexure 1

Enrollment no:

STUDENT'S WEEKLY RECORD OF INTERNSHIP

NAME OF STUDENT:

DIARY OF THE WEEK: Dt:_____TO____

DEPARTMENT: _____SEM:

NAME OF THE ORGANISATION:

NAME OF THE PLANT/SECTION/DEPARTMENT:

NAME OF OFFICER INCHARGE OF THE PLANT/SECTION/DEPARTMENT:

DESCRIPTION OF THE WORK DONE IN BRIEF



GUJARAT TECHNOLOGICAL UNIVERSITY (Established under Gujarat Act No. 20 of 2007) ગુજરાતટેકનોલોજીકલ યુનિવર્સિટી (ગુજરાત અધિનિયમ ક્રમાંકઃ ૨૦/૨૦૦૭ દ્વારા સ્થાપિત)

TOTAL HOURS:	SIGNATURE OF STUDENT
The above entries are correct and the grading of work done by Trainee is EXCELLENT / VERY GOOD / GOOD / FAIR / BELOW AVERAGE / POOR	
Signature of Faculty Mentor	Signature of officer-in-charge of Dept. / Section / Plant
Date:	Date:

Grading of Work, for trainee may be given depending upon your judgement about his Punctuality, Regularity, Sincerity, Interest taken, Work done etc.



SUPPLEMENTRY NOTES (add additional sheets if required)