Sri Balaji Chockalingam Engineering College

Approved by AICTE | Affiliated to Anna University
An ISO 21001 : 2018 - Certified Institution
30 Years of Legacy Excellence in Engineering Education

Department of Computer Science and Business Systems
Academic Year : 2026 - 2027

STUDENT INTERNSHIP PROGRAM ASSESSMENT FORM

(Complete and submit to the Internship Program Coordinator. Type or print clearly.)

Student Name (In Capital)			
Register Number		**Mobile Number 1**	
Year & Semester		**Mobile Number 2**	
Email ID			
Campus Address			
Residential Address			
Academic Concentration		**Over All CGPA (Up to Current Semester)**	

Internship Preferences*

Sl. No.	Location	Core Area	Company / Institution	Status of Approval

Faculty Mentor Signature : _____ Date : _____

(This Signature confirms that the student has attended the internship orientation and has met all paperwork and process requirements to participate in the internship program, has met the minimum overall GPA of 6.0, average GPA within major of 6.5 and has received approval from his/her Advisor)

Student Signature : _____ Date : _____

(This Signature confirms that the student agrees to the terms, conditions, and requirements of the Internship Program)