



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 Engineering

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)				

