

TITLE OF THE INTERNSHIP

*Internship Report submitted to the University of Calicut
for the award of the Bachelors Degree in **Name of the
Major***

Name of the Student

(Regn. No.)

Name of the Department of the student
**Name of the College where the student is
studying**

Year Under the supervision of

Name of the Supervisor/Mentor

Adress of the Supervisor/Mentor

DECLARATION

I, *Name of the student*, hereby declare that the project report entitled "TITLE OF THE PROJECT" is a bonafide record of research done by me under the supervision/Mentoring of *Name and address of the Supervisor/Mentor* and this project report or any part thereof has not been submitted by me for the award of any other degree, diploma, title or recognition before.

Date

Name of the Student

Place:

Countersigned by the Supervisor/Mentor:

Internship Co-ordinator

Head of the Department.

Internship Completion Certificate

Name of The Student

Name of the Course

Type of Work Done

duration of work

Date	Time		Hours Worked
	From	To	

Add Columns if necessary

Signed by the Supervisor/Mentor:

This report should contain the following:

- Details of the work done,
- Duration of Work and Outcome of the work.
- Detailed structure as per the Board of Studies if necessary.