Department of Atomic Energy Indira Gandhi Centre for Atomic Research Safety, Quality and Resource Management Group

Students Project Request Proforma for wards of Employees

Name of the Employee	:		
Designation	:	Group/Unit:	
Email ID	:	Intercom/Mo	obile No:
Name of the Student	:		
Degree	: □ B. E □ B. Tech □ Ot	hers	_
Discipline	:	Year of Studying:	
Name of the College	:		
Type of Project work	: □ In-Plant Training □	l Mini Project	□ Project Work
Duration of Project worl	k: From: To:		
Guide Name	:		
Division/ Group Name	:		
Guide Signature	:		
Division Head Signature	e :		
Group Director Signatu	re:		
I request you to permit plant training/Project w	my son/daughter Ms./Mr ork at our Centre.		to do the In-
Date:			
		Signatu	re of the Employed
To:			
Dr. B. Venkatraman, D	Pirector, IGCAR		
Email: dirsec@igcar.gov.in	;		