DHSK COLLEGE (AUTONOMOUS)

DECLARATION / UNDERTAKING FOR INTERNSHIP PROGRAMME

(For UG 5th Semester Students - 4 Credit Internship Programme)

I,	, bearing Roll No	, currently enrolled in the	
		& Department], 5th Semester, a	
DHSK College (Autonomous), do	hereby solemnly declare and undertak	e the following in respect of the	
mandatory internship programme as J	per curriculum requirements:		
1. I understand that the internship pr	rogramme is a compulsory 4-credit comp	ponent for partial fulfillment of my	
Undergraduate Degree under DHSK guidelines issued.	College (Autonomous), and I agree to u	ndertake the programme as per the	
2. I hereby acknowledge that no fir	nancial assistance, stipend, or reimburse	ement will be provided by DHSK	
College (Autonomous) for the duration risk.	on of this internship. I will undertake the	internship at my own expense and	
3. I take full responsibility for my co	onduct, safety, and wellbeing during the i	internship period. I understand that	
DHSK College shall not be held lia	able or accountable for any incidents, act	tions, or mishaps occurring during	
the internship.			
0 1	ned by the internship provider and comp hedule specified by the Nodal Officer,	•	
(Autonomous).			
5. I understand that the duration of	the internship must fall within the time	eframe specified by the Internship	
Cell, and any extension of time, if	genuinely required, shall be subject to	the written approval of the Noda	
Officer only.			
6. I assure that I shall attend my reg it does not interfere with my academi	gular classes and manage my time and resicce obligations at the college.	sponsibilities in such a manner tha	
7. I undertake to submit all require	ed reports, certificates, and evaluations	as per the prescribed format and	
deadline issued by the college.			
I hereby confirm that I have read ar	nd understood the terms and conditions	of the internship programme and	
agree to abide by them in letter and s	pirit.		
Date:			
Place:			
	Sig	Signature of the Student	
	Name:		
	Roll No.:		
		er:	
Signature of Parent/Guardian			

Signature of Parent/Guardian

(As a mark of consent and awareness)