



**BHADRAK
INSTITUTE OF ENGINEERING &
TECHNOLOGY
BARAPADA - 756113**

Ref. No.....

Date.....

**From
Training & Placement Cell,
BIET, Barapada, Bhadrak.**

To

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.....

Sub :- Summer Vacation Training of B.Tech students.

Dear Sir,

Please find the names of the student of our Institute, who are pursuing B.Tech Degree. These students name are forwarded to your esteemed Organisation with the objective of receiving vocational training as per the academic requirement of the University.

Kindly, provide necessary guidance & facilities so that this period of training (30 calendar days) during the summer vocation May/June 2013 becomes productive in the national interest.

| <u>Sl.No.</u> | <u>Name</u> | <u>Discipline</u> | <u>Semester</u> |
|---------------|-------------|-------------------|-----------------|
| 1. | | | |
| 2. | | | |
| 3. | | | |
| C.C. | | | |

Thanking you,

Yours Sincerely,

**O.I.C. Training & Placement Cell,
BIET, Barapada, Bhadrak.**

AT/P.O.- BARAPADA, DIST.-BHADRAK, PIN - 756113 (ORISSA)

Phone : Principal (06784) 261633 (O), 240972 (R), Fax. (06784)-261632, <http://www.bsetorissa.com>

E-Mail : [Principalbiet @ Yahoo.co.in](mailto:Principalbiet@yahoo.co.in), Principal @ rediffmail.com .

UNDERTAKING

I Mr. /Miss.....
Son of Mr. /Mrs.....
At.....Po.....Dist.....
State.....College Roll No.....Regd.No.....
Branch.....Year.....Semester.....here by undertake that.
I would like to take training at.....From Dt.....to
Dt.....on my own risk, although it's not prescribed by the University. I would abide by all
the rules, regulations & health and safety norms of the company during the course of my training for
any accident/injuries/mishaps of damages occurs with/due to me, I would be held solely responsible for
it & none of the college authorities shall be thereby accountable for that.

Date:

Place:

Signature.

Company reference:

Home Address:

Name.....

Name of Father/Guardian.....

Position.....

At.....

Department/Section.....

Po.....

Contact No.....

Dist.....

Name of Company.....

State.....

At.....Po.....

Pin.....

Dist.....State.....

Contact No.....

Pin.....Contact No.....