

NARULA INSTITUTE OF TECHNOLOGY , AGARPARA, KOLKATA – 700109
WEST BENGAL TECHNICAL EDUCATION QUALITY IMPROVEMENT PROGRAMME (TEQIP – II)
Format of application for Industrial Tour

(1) Name of the Department : (Organizing & conducting the tour)

(2) Name and Address of the Industry to be visited:

(3) Date of visit:

(4) Objective of the Industrial Tour: (Specific linkage with the Project)

(5) Desired outcome of the Industry visit:

(6) (a) No. of students involved:	Level: UG/PG Please Tick	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: center;">Number of Student</th> </tr> <tr> <td style="width: 50%; text-align: center;">Boys</td> <td style="width: 50%; text-align: center;">Girls</td> </tr> <tr> <td style="height: 20px;"></td> <td style="height: 20px;"></td> </tr> </table>	Number of Student		Boys	Girls		
Number of Student								
Boys	Girls							

(6) (b) No. of Faculty Coordinator to be visited along with the students: (CV attached)

Sl. No.	Name of Faculty with Signature	CV attached (Y/N)

(7) Specific Questionnaire framed or not? (Please Tick)	YES/NO
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If YES, please attach the questionnaire

(8) Total Budget with breakup:

SI.No.	Particulars	Amount (Rs)
1	Transportation	
2	Refreshment	
3	Printing Consumables	

(9) Advance required if any YES/NO if YES Rs...../-

(10) Consent from the concerned Personnel of the Organization/Industry.
(Attach confirmation mail)

Declaration

I undertake the following regarding the <type of training programme> at <Venue> from <period>.

(i) I shall abide by the norms specified in the PIP of TEQIP Phase-II.
(ii) I shall submit a report to the Head of the Institution within one week after the said event.
(iii) I shall submit the copy of all other details including certificate, original money receipt, bills of other sundry expenses within 3 days of resumption of my duty.

.....
<Name /Signature of Department HOD>
(<designation>, <department>)

On the basis of the undertaking <name>, <designation>, <department> is recommended to attend the <training type> on “<title of training>” at <venue> from <period> and there is no objection on the part of the institution in this regard. This may also be noted that all reports which will be submitted by <name> in the future relating to this undertaking and to be hosted in the Institution’s website and linked to NPIU’s website.

.....
Prof.(Dr.)J.K.Das
Principal (Head of the Institution)

[Signature (with seal)of the Coordinator (TEQIP – II)]	[Signature (with seal) of the Nodal Officer (Finance) TEQIP – II]	[Signature (with seal) of the Principal / Registrar]	[Signature (with seal) of the Chairman – Board of Governors]]