



Rajiv Gandhi University of Knowledge Technologies

(A.P. Govt. Act 18 of 2008 & Telangana Govt. Adaptation G.O. MS No.29 Dt.17.12.2014)

Basar (Village & Mandal), Nirmal District, Telangana State – 504107, India.

RGUKT/Acad/2023-24/NB-HUB/2024

Date: 12-05-2024

CIRCULAR

(For E3 Students)

Sub: RGUKT – Academic Section – Summer Internship Guidelines and Evaluation criteria for AY 23-24_E3 Sem II Internship - Reg

This is to inform you that, E3 students of AY 23-24 are required to submit the Summer Internship details through the Google Form with the link provided below:

<https://forms.gle/ncFLCtGuCWPqwwyn7>

A copy of Internship Guidelines and evaluation sheet is also provided for your information. The students need to take the print out of the attendance sheet and the evaluation sheet. Fill in all the details in the sheet and get it signed and evaluated by the respective supervisor of the organization where the student has been performing their internship.

Following is the Summer Internship evaluation pattern:

1. Evaluation by Supervisor from the Organization – 30 Marks
2. Internship Report – 30 Marks
3. Internship Presentation and Viva-voce – 40 Marks

-sd/-

Associate Dean Engineering

Copy to:

1. All the HoDs / Associate Deans
2. All the Notice Boards/University Hub

Annexure 1: STUDENT INTERNSHIP PROGRAM APPLICATION

Complete and submit to the TPO/ Internship Program Coordinator. Type or write clearly.

1. Student Name:			
2. Campus Address:		Phone:	
3. Home Address:		Phone:	
3a. Student email address:			
4. Academic Concentration	5. Internship Semester: _____ Year.		
6. Overall GPA:			
9. Internship Preferences			
	Location	Core Area	Company/ institution
Preference-1			
Preference-2			
Preference-3			
Faculty mentor Signature: _____ Date _____.			
Signature confirms that the student has attended the internship orientation and has met all paperwork and process requirements to participate in the internship program, and has received approval from his/her Advisor.			
Student Signature: _____ Date _____.			
Signature confirms that the student agrees to the terms, conditions, and requirements of the Internship Program			



Rajiv Gandhi University of Knowledge Technologies

(A.P. Govt. Act 18 of 2008 & Telangana Govt. Adaptation G.O.Ms No.29 Dt.17.12.2014)

Basar (Village & Mandal), Nirmal District, Telangana State – 504107, India.

Website: www.rgukt.ac.in

Date:

To

Dear Sir/Madam

Subject: Letter of Recommendation for Internship

About us:

RGUKT-Basar is established by State Govt. in the year 2008 (ACT 18) with a mission to impart high quality technical education to the talented, but deprived rural students of Andhra Pradesh and Telangana state.

Mr. Rahul Bojja, IAS is the **Vice Chancellor** of this university.

RGUKT is a technical university with several unique features in term of admission, method of teaching, curriculum, faculty and mission of university. Admission in to 6 year integrated course (2 years of PUC + 4 years of engineering) is based on class X marks (top 1% who pass class X would get admission),use of Information and communication Technology (ICT) for teaching the courses (first of its kind in the country), curriculum similar to IIT, more than 90% faculty members have one of the degrees from IIT, 100% residential green campus like IIT, mission to provide a value based technical education to rural students, first of its kind in the country, are some of the unique features of this university.. For more details about this university, please visit www.rgukt.ac.in

Since its inception in 2008 with student strength of more than 2000 per annum, the institute has come a long way. The institute has diversified to offer B. Tech Degree in seven engineering courses such as Chemical Engineering, Civil Engineering, Computer Science and Engineering, Electronics & Communications Engineering, Materials Science and Metallurgical Engineering, Electrical Engineering and Mechanical Engineering. The courses have the best of faculties and staff from reputed universities, and adopts an IT-enabled pedagogy in teaching and as well as for examinations. In addition to providing an excellent professional training, the institute also inculcates human values and professional ethics in the students that help them in becoming better citizens.

Details of students interested in internship with your esteemed organization.

College ID number	Name	Branch	Mobile Number	Area of interest (if any)

Above students, as a part of academic curricula are to undergo internship training between May 2020 to July 2020 for a duration of 08 weeks. They are interested in applying to your prestigious organization for the scientific research/industrial experience as summer internship position.

We believe that the students would be an asset to your program. This internship would provide them the ideal opportunity to assist at your organization and to expand their research/practical skills.

In view of the above, I request your good self to allow our following _____ students for practical raining in your esteemed organization. Kindly accord your permission and give at least one-week time for students to join training after confirmation.

If vacancies exist, kindly do plan for Campus/Off Campus Interview for 2021 Graduates.

A line of confirmation will be highly appreciated.

With warm regards,

Yours sincerely,

Head of the Department

Dept of _____

Mail: intern@rgukt.ac.in

**Annexure 3: OBJECTIVES/ GUIDELINES/ AGREEMENT: INTERNSHIP SYNOPSIS
(THIS WILL BE PREPARED IN CONSULTATION WITH FACULTY MENTOR)**

An internship is a unique learning experience that integrates studies with practical work. This agreement is written by the student in consultation with the faculty Mentor and Industrial supervisor. It shall serve to clarify the educational purpose of the internship and to ensure an understanding of the total learning experience among the principal parties involved.

Part I: Contact Information

Student

Name: _____ Student ID# _____ Class Year: _____

Campus Address: Room No _____ Hostel _____ IIIT Basar Campus RGUKT Basar.

Phone: _____ Email: _____

Industrial Supervisor

Name: _____ Title: _____

Company/Organization: _____

Internship Address: _____

City, State, Pin: _____

Phone: _____ Email: _____

Faculty Mentor

Name: _____ Phone: _____

Campus Address: _____

Academic Credit Information

Internship Title: _____ Department: _____

Course #: _____ Credits: _____

Grading Option: _____ Credit/Non-credit _____

Beginning Date: _____ Ending Date: _____

Hours per Week: _____ Internship is: _____ Paid _____ Unpaid _____

AICTE INTERNSHIP POLICY: GUIDELINES & PROCEDURES

Part II: Internship Objectives/Learning Activities

Internship Objectives: What do you intend to learn, acquire and clarify through this internship? Try to use concrete, measurable terms in listing your learning objectives under each of the following categories:

- Knowledge and Understanding

- Skills

Learning Activities: How will your internship activities enable you to acquire the knowledge/understanding, and skills you listed above?

On the job: Describe how your internship activities will enable you to meet your learning objectives. Include projects, research, report writing, conversations, etc., which you will do while working, relating them to what you intend to learn.

Teaching/Mentoring Activities: How your technical knowledge can be applied at the site of the internship. How you can create value through mentoring/help people learn new things.

Off the job: List reading, writing, contact with faculty supervisor, peer group discussion, field trips, observations, etc., you will make and carry out which will help you meet your learning objectives.

Evaluation: Your Internship supervisor will provide a written evaluation of your internship. Describe in detail what other evidence you will provide to your faculty Mentor to document what you have learned (e.g. journal, analytic paper, project, descriptive paper, oral presentation, etc.) Include deadline dates.

Part III: The Internship

Job Description: Describe in as much detail as possible your role and responsibilities while on your internship. List duties, project to be completed, deadlines, etc. How can you contribute to the organization/site of internship?

Supervision: Describe in as much detail as possible the supervision to be provided/needed at the work site. List what kind of instruction, assistance, consultation you will receive from whom, etc.

Evaluation: How will your work performance be evaluated? By whom? When?

Part IV: Agreement

This contract may be terminated or amended by student, faculty coordinator or work supervisor at any time upon written notice, which is received and agreed to by the other two parties.

Student _____

Date _____

Faculty Mentor _____

Date _____

Industry Supervisor _____

Date _____



Part – II
RELIEVING LETTER OF STUDENT

To

.....
.....

Subject: Relieving letter of student and industry

Dear Sir,

Kindly refer your letter/e-mail dated..... on the above cited subject. As permitted by your good self the following students will undergo Industrial Internship in your esteemed organization under your sole guidance & directions.

S. No.	Name of the Student	ID No.	Branch

This training being an essential part of the curriculum, the following guidelines have been prescribed in the curriculum for the training. You are therefore, requested to please issue following guidelines to the concerned manager/Industrial Supervisor.

1. Internship schedule may be prepared and a copy of the same may be sent to us.
2. Each student is required to prepare internship diary and report.
3. Kindly check the internship diary of the student daily.
4. Issue instruction regarding working hours during training and maintenance of the attendance record.

You are requested to evaluate the student's performance on the basis of grading i.e. Excellent, Very Good, Satisfactory and Non Satisfactory on the below mentioned factors. The performance report may please be forwarded to the undersigned on completion of training in sealed envelope.

S. No.	Name of Students	Evaluation Ranking
a	Attendance and general behavior	
b	Relation with workers and supervisors	
c	Initiative and efforts in learning	
d	Knowledge and skills improvement	
e	Contribution to the organization	

Your efforts in this regard will positively enhance knowledge and practical skills of the students, your cooperation will be highly appreciated and we shall feel obliged.

The students will abide by the rules and regulations of the organization and will maintain a proper discipline with keen interest during their internship. The students will report to you on dated..... along with a copy of this letter.

Yours sincerely,

Dean/HOD/Administration

Part-II (1): STUDENT'S DAILY DIARY/ DAILY LOG (Week-1)

Deptt./ Division		Name of the HOD/Supervisor			
		Email ID			
DAY-1		DATE			
Time of arrival		Time of Departure		Remarks	
Main points/work of the day					
DAY-2		DATE			
Time of arrival		Time of Departure		Remarks	
Main points/work of the day					
DAY-3		DATE			
Time of arrival		Time of Departure		Remarks	
Main points/work of the day					
DAY-4		DATE			
Time of arrival		Time of Departure		Remarks	
Main points/work of the day					
DAY-5		DATE			
Time of arrival		Time of Departure		Remarks	
Main points/work of the day					
DAY-6		DATE			
Time of arrival		Time of Departure		Remarks	
Main points/work of the day					

Signature of Industry Supervisor

STUDENT'S DAILY DIARY/ DAILY LOG (Week-2)

Deptt./ Division		Name of the HOD/Supervisor			
		Email ID			
DAY-1		DATE			
Time of arrival		Time of Departure		Remarks	
Main points/work of the day					
DAY-2		DATE			
Time of arrival		Time of Departure		Remarks	
Main points/work of the day					
DAY-3		DATE			
Time of arrival		Time of Departure		Remarks	
Main points/work of the day					
DAY-4		DATE			
Time of arrival		Time of Departure		Remarks	
Main points/work of the day					
DAY-5		DATE			
Time of arrival		Time of Departure		Remarks	
Main points/work of the day					
DAY-6		DATE			
Time of arrival		Time of Departure		Remarks	
Main points/work of the day					

Signature of Industry Supervisor

STUDENT'S DAILY DIARY/ DAILY LOG (Week-3)

Deptt./ Division		Name of the HOD/Supervisor			
		Email ID			
DAY-1		DATE			
Time of arrival		Time of Departure		Remarks	
Main points/work of the day					
DAY-2		DATE			
Time of arrival		Time of Departure		Remarks	
Main points/work of the day					
DAY-3		DATE			
Time of arrival		Time of Departure		Remarks	
Main points/work of the day					
DAY-4		DATE			
Time of arrival		Time of Departure		Remarks	
Main points/work of the day					
DAY-5		DATE			
Time of arrival		Time of Departure		Remarks	
Main points/work of the day					
DAY-6		DATE			
Time of arrival		Time of Departure		Remarks	
Main points/work of the day					

Signature of Industry Supervisor

STUDENT'S DAILY DIARY/ DAILY LOG (Week-4)

Deptt./ Division		Name of the HOD/Supervisor			
		Email ID			
DAY-1		DATE			
Time of arrival		Time of Departure		Remarks	
Main points/work of the day					
DAY-2		DATE			
Time of arrival		Time of Departure		Remarks	
Main points/work of the day					
DAY-3		DATE			
Time of arrival		Time of Departure		Remarks	
Main points/work of the day					
DAY-4		DATE			
Time of arrival		Time of Departure		Remarks	
Main points/work of the day					
DAY-5		DATE			
Time of arrival		Time of Departure		Remarks	
Main points/work of the day					
DAY-6		DATE			
Time of arrival		Time of Departure		Remarks	
Main points/work of the day					

Signature of Industry Supervisor

STUDENT'S DAILY DIARY/ DAILY LOG (Week-5)

Deptt./ Division		Name of the HOD/Supervisor		
		Email ID		
DAY-1		DATE		
Time of arrival		Time of Departure		Remarks
Main points/work of the day				
DAY-2		DATE		
Time of arrival		Time of Departure		Remarks
Main points/work of the day				
DAY-3		DATE		
Time of arrival		Time of Departure		Remarks
Main points/work of the day				
DAY-4		DATE		
Time of arrival		Time of Departure		Remarks
Main points/work of the day				
DAY-5		DATE		
Time of arrival		Time of Departure		Remarks
Main points/work of the day				
DAY-6		DATE		
Time of arrival		Time of Departure		Remarks
Main points/work of the day				

Signature of Industry Supervisor

STUDENT'S DAILY DIARY/ DAILY LOG (Week-6)

Deptt./ Division		Name of the HOD/Supervisor			
		Email ID			
DAY-1		DATE			
Time of arrival		Time of Departure		Remarks	
Main points/work of the day					
DAY-2		DATE			
Time of arrival		Time of Departure		Remarks	
Main points/work of the day					
DAY-3		DATE			
Time of arrival		Time of Departure		Remarks	
Main points/work of the day					
DAY-4		DATE			
Time of arrival		Time of Departure		Remarks	
Main points/work of the day					
DAY-5		DATE			
Time of arrival		Time of Departure		Remarks	
Main points/work of the day					
DAY-6		DATE			
Time of arrival		Time of Departure		Remarks	
Main points/work of the day					

Signature of Industry Supervisor

Part-II (2): SUPERVISOR EVALUATION OF INTERN

Student Name: _____ Date: _____

Work Supervisor: _____ Title: _____

Supervisor Mobile No _____ Email _____

Company/Organization: _____

Internship Address: _____

Dates of Internship: From _____ To _____

Please evaluate your intern by indicating the frequency with which you observed the following behaviors:

Parameters	Needs improvement	Satisfactory	Good	Excellent
Behaviors				
Performs in a dependable manner				
Cooperates with co-workers and supervisors				
Shows interest in work				
Learns quickly				
Shows initiative				
Produces high quality work				
Accepts responsibility				
Accepts criticism				
Demonstrates organizational skills				
Uses technical knowledge and expertise				
Shows good judgment				
Demonstrates creativity/originality				
Analyzes problems effectively				
Is self-reliant				
Communicates well				
Writes effectively				
Has a professional attitude				
Gives a professional appearance				
Is punctual				
Uses time effectively				

Additional comments, if any:

Please complete the following details for this candidate. We would appreciate your opinion concerning the applicant's aptitude and potential based on your knowledge of his/her work.

Take the various components/Parameters of the student's performance as mentioned above.

PERCENTAGE MARKS FOR THE STUDENT'S PERFORMANCE:

..... (In figures); (in words)

Signature of Supervisor/Guide/Advisor
Name of the Supervisor/guide/Advisor

(Office Seal)

()

Request to the supervisor/guide/Advisor: Details in the above form should be filled up and put it in an envelope, seal it and post to the address given in Part C of this annexure III.

Part-III

STUDENT FEEDBACK OF INTERNSHIP (TO BE FILLED BY STUDENTS AFTER INTERNSHIP COMPLETION)

Student Name: _____ Date: _____

Industrial Supervisor: _____ Title: _____

Supervisor Email: _____ Internship is: _____ Paid _____ Unpaid _____

Company/Organization: _____

Internship Address: _____

Faculty Coordinator: _____ Department: _____

Dates of Internship: From _____ To _____

Please fill out the above in full detail

Give a brief description of your internship work (title and tasks for which you were responsible):

Was your internship experience related to your major area of study?

_____ Yes, to a large degree _____ Yes, to a slight degree _____ No, not related at all

Indicate the degree to which you agree or disagree with the following statements.

This experience has:	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree
Given me the opportunity to explore a career field					
Allowed me to apply classroom theory to practice					
Helped me develop my decision-making and problem-solving skills					
Expanded my knowledge about the work world prior to permanent employment					
Helped me develop my written and oral communication skills					
Provided a chance to use leadership skills (influence others, develop ideas with others, stimulate decision-making and action)					
This experience has:	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree
Expanded my sensitivity to the ethical implications of the work involved					

AICTE INTERNSHIP POLICY: GUIDELINES & PROCEDURES

Made it possible for me to be more confident in new situations					
Given me a chance to improve my interpersonal skills					
Helped me learn to handle responsibility and use my time wisely					
Helped me discover new aspects of myself that I didn't know existed before					
Helped me develop new interests and abilities					
Helped me clarify my career goals					
Provided me with contacts which may lead to future employment					
Allowed me to acquire information and/or use equipment not available at my Institute					

In the Institute internship program, faculty members are expected to be mentors for students. Do you feel that your faculty coordinator served such a function? Why or why not?

How well were you able to accomplish the initial goals, tasks and new skills that were set down in your learning contract? In what ways were you able to take a new direction or expand beyond your contract? Why were some goals not accomplished adequately?

In what areas did you most develop and improve?

What has been the most significant accomplishment or satisfying moment of your internship?

What did you dislike about the internship?

Considering your overall experience, how would you rate this internship? (Circle one).

(Satisfactory/ Good/ Excellent)

Give suggestions as to how your internship experience could have been improved. (Could you have handled added responsibility? Would you have liked more discussions with your professor concerning your internship? Was closer supervision needed? Was more of an orientation required?)

PROFORMA FOR EVALUTION OF INTERNSHIP BY RGUKT BASAR

Evaluation (I) _____

1. Name of Student _____ Mob. No. _____
2. College Roll No. _____ University Roll No. _____
3. Branch/Semester _____ Period of Training _____
4. Home Address with contact No. _____
5. Address of Training Site: _____
6. Address of Training Providing Agency:

7. Name/Designation of Training In- charge _____
8. Type of Work _____
9. Date of Evaluation _____
 - a) Attendance: _ (Satisfactory/ Good/ Excellent) Part-II (1)
 - b) Practical Work: __ (Satisfactory/ Good/ Excellent)
 - c) Faculty's Evaluation: _ (Satisfactory/ Good/ Excellent)
 - d) Evaluation of Industry: ___ (Satisfactory/ Good/ Excellent) Part –II (2)

Overall grade: (Satisfactory/ Good/ Excellent)

Signature of Faculty Mentor

Head of the Department

Dept of _____

With date and stamp

***Photocopy of the attendance record duly attested by the training in-charge should be attached with the evaluation Proforma**

Note: A copy to be submitted to Training & Placement Office for records.

