PROJECTWORK
Registration Form

SOFTWARE TRAINING AND DEVELOPMENT CENTRE, THIRUVANANTHAPURAM
CENTRE FOR DEVELOPMENT OF ADVANCED COMPUTING

1. Name (in BLOCK Letters)	
2. Gender	Male / Female
3. Date of Birth	
4. Name of Course undergoing	B.Tech / B.E M.Tech/MCA /M.Sc
5. College Address	
6. Name of University	
7. No. of semesters completed	

8. Percentage of marks: Sem 1	Sem 2	Sem 3	Sem 4	Sem 5	Sem 6

9. Address for Communication	Tel: Mob:
10. Permanent Address	
11. Project Period	
12. Project Title	
13. The software required for the proposed project	
14. Software Skills	
15. Name of Parent / Guardian	
16. Contact Address of Parent / Guardian	Tel: Mob:

[Registration Fee of Rs 2000/- has to be paid at the time of registration and balance amount to be paid at the time of joining of the project]

Declaration

If selected for project work, I agree to abide by the rules and regulations of the centre. I understand that the result of the project work will be the physical and intellectual property of C-DAC. I am responsible for my own safety while inside C-DAC premises and shall follow all safety precautions and understand that C-DAC shall not be liable to pay any compensation for any personal injury caused by an accident in the course of my work in C- DAC. I also agree to pay the fee fixed by C-DAC authorities in lump sum towards utilization of infrastructural facilities for the duration of the project work and k n o w that the Fee once paid (including Registration Fee)is non-refundable at any cause. I will not disclose to anyone any technical information relating to the project without prior permission from C-DAC.

Place: *Signature:*

Date: *Name:*

P R O J E C T W O R K

RECOMMENDATION

I recommend……………..………for pursuing his/her project work at your organization. The particulars furnished above by the student are true. During the project period at your organization, he/she will abide by the rules and regulations stipulated by you. The total period available for doing the project is from

……..........……………..to ……………….........…….

We guarantee proper conduct of the student and we understand that we are liable to compensate any damage/loss that may be caused by the student to C-DAC in the course of the project work.

Signature.……………...........…
(Head of the Department)

Name of the Institution: *(Office seal)*

 Date.....................

(For C-DAC use only)

Project	:	
Duration	:	
Name Department and Signature of Guide	:	
Payment details	: *Reg :*	
	Bal:	

Forwarded to:

The Co-ordinator (Student Project)
SOFTWARE TRAINING AND DEVELOPMENT CENTRE
CENTRE FOR DEVELOPMENT OF ADVANCED COMPUTING(C-DAC)
Technopark Campus, Thiruvananthapuram-695581