Format for Application for DRDO Paid Internship Scheme

1.	Name of the Applicant	:	Affix Passport
2.	Date of Birth	:	·
3.	Aadhar No	:	size photo
4.	Name, Address & Contact No. of the College	:	(4.5 x 3.5cm)
5.	Discipline	:	
6.	Branch Code	:	
7.	Degree	:	UG: Semester/Year: PG: Semester/Year:
8.	CGPA(On Scale of10) (Copy To be Enclosed)	:	
9.	Achievement (Awards/Professional Membership, if any to be mentioned)	:	
10.	Languages Known	:	
11.	Referral letter from Principal/Director of college /institute	:	To be mandatorily attached
12.	Permanent Address	:	
13.	Local Address, if any	:	
14.	Contact No of Individual: Alternate No:	:	
15.	Email Id of Individual	:	
16.	Checklist (Please Tick)	:	Reference Letter issued by Principal/Director UG/PG Marksheet Reflecting CGPA Copy of latest Aadhar Card

The above information is correct as per my best of knowledge and belief.

Place:	
Date:	Signature of the Applicant

Ref No:		Date:				
To,						
The Director, Instruments Research and Development Establishment (IRDE), Defence R&D Organisation, Raipur Road, Dehradun-248008.						
Subject: Request for Paid Internship opportunity for a period of six months						
Respected Sir,						
We request an internship opportunity for our VII/VIII semester engineering student / I/II year Post Graduate student for Paid Internship Scheme of DRDO at IRDE, Dehradun.						
Shri/Msis a bonafide student of this college having enrollment no						
We request an internship from 1 st Aug 2025 to 31 st Jan 2026. Below are the details of the student, faculty coordinator and the college / institution:						
Student Details:						
<u> </u>						
Name						
Name						
Name Course						
Name Course PRN/College ID Number	ess					
Name Course PRN/College ID Number Mobile No.	ess					
Name Course PRN/College ID Number Mobile No. Permanent Residential Addre	ess					
Name Course PRN/College ID Number Mobile No. Permanent Residential Addre	ess					
Name Course PRN/College ID Number Mobile No. Permanent Residential Addre Email ID Faculty Coordinator Details:	ess					
Name Course PRN/College ID Number Mobile No. Permanent Residential Addre Email ID Faculty Coordinator Details: Name of Faculty	ess					
Name Course PRN/College ID Number Mobile No. Permanent Residential Addre Email ID Faculty Coordinator Details: Name of Faculty Designation	ess					
Name Course PRN/College ID Number Mobile No. Permanent Residential Addre Email ID Faculty Coordinator Details: Name of Faculty Designation Department	ess					

College Details:

College Name	
AICTE Permanent ID	
DTE Code	
Affiliated to	
Affiliation ID	
Email ID	
Contact No.	
Fax No.	

The college has no objection if he/she joins internship at your organization and is physically present in the establishment for a minimum of 15 working days in a month. The college will relieve the student to undergo the internship at your establishment. We also hereby accept to give the indemnity form as and when required by IRDE, Dehradun.

It is also hereby assured that student will complete full tenure of his/her paid training.

We believe that this internship will be an excellent opportunity for our student to enhance his/her technical skills. Kindly consider this request and grant the necessary permissions. We assure you of our student's commitment to learning and adherence to all institutional norms.

Thanks and Regards,

Signature of Principal/Director of College / Institution
With Office Seal.