

Format for Application for DRDO Paid Internship Scheme

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

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

Place:

Date:

Signature of the Applicant

Ref No: _____

Date: _____

To,

The Director,
Defence Metallurgical Research Laboratory (DMRL),
Defence R&D Organisation,
Kanchanbagh, Hyderabad-500058.

Subject : [Request for Paid Internship opportunity for a period of six months.]

Reference : Advertisement No. DMRL/HRD/PIS/2025/01 dated 15th July 2025.

Respected Sir,

We request an internship opportunity for Shri/Ms....., who is a bonafide student of this college having enrollment no..... . He /She is pursuing his study in Semester/Year of B.E./B. Tech./ M.E./M. Tech./M. Sc. of our institution and is eligible for Paid Internship Scheme of DRDO at DMRL, Hyderabad.

2. He/She is a meritorious student and is eager to gain practical exposure in the defence related applications through an internship at your esteemed organization.

3. We request an internship from _____ to _____ (____ months). Below are the details of the student, faculty coordinator and the college / institution:

(I) Student Details:

Name	:	
Course	:	
College ID	:	
Number	:	
Mobile No.	:	
Permanent Residential Address	:	
Email ID	:	

(II) Faculty Details:

Name of Faculty	:	
Designation	:	
Department	:	
Contact No.	:	
Email ID	:	
HOD Email ID	:	

(III) College Details:

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

4. The college has no objection if he/she joins internship at your organization and is physically present in the establishment ensuring maximum attendance in a month. The college will relieve the student to undergo the internship at your establishment.

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

6. 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/
Head of the College Institution**
with Office Seal

UNDERTAKING

INDIAN OFFICIAL SECRETS ACT

I, _____ S/o / D/o _____ resident of (address) _____ District _____ hereby certify that I have been made acquainted with the provision of the Indian Official Secrets Act, 1923. I understand that in case of breach of official trust, I am liable to the penalties detailed in the mentioned Act.

Station : _____

Date : _____

Signature _____

Name: _____

UNDERTAKING

I, _____ S/o / D/o _____ resident of (address) _____ District _____ hereby certify that I will follow IT Rules and Regulations applicable for Ministry of Defence and its amendments thereof. I understand that in case of breach, I am liable to the penalties detailed in the mentioned Rules.

Station : _____

Date : _____

Signature _____

Name: _____