## Office of the Principal CBL Govt.College Balsamand (Hisar)

### **Notice**

Ref. No. GCB/2025/ 523

Date Of June, 2025

All the students of B.A 1<sup>st</sup> are hereby informed that as per the National Education Policy (NEP) 2020, it is mandatory for all first-year undergraduate students (Semester II) to complete an internship of 4 to 6 weeks (120 hours) during their summer vacation. This internship can be undertaken either after the Semester II or Semester IV theory examinations.

Students are free to pursue an internship on their own, based on their interests and willingness, at any recognized company, firm, or skill Centre. A list of a few organizations with which the college has signed Memorandum of Understanding (MoUs) is provided below for reference.

#### The procedure for completing internship is as follows:

- 1. Students will submit an application form duly filled in the college up to 10 June, 2025.
- 2. Students will obtain a recommendation letter from the college.
- 3. The recommendation letter will be submitted to the firm/company or any other place where student wishes to do their internship.
- 4. The student will submit the consent from the company to the college.

### After completion of Internship

- 1. Student has to submit a completion certificate as per the format given by the university.
- 2. The certificate format can be obtained from the internship cell.
- 3. Internship report as per the format given by the university, which can be obtained from the internship cell.
- 4 After submission of report and certificate the student has to appear for viva-voce.

Recommendation letter, Consent form and Format of Certificate is attached.

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Principal Principal CBL Geve Gallege Balsamand Hisaralsamand, HISAR

## Office of the Principal CBL Govt.College Balsamand (Hisar)

Objective of MoU	Name of Org. of MoU	Domain/Industry of the Org. with which MoU is signed.	Nature of MoU	Deliverables under MoU	Date of Signing of MoU
Internship for UG students as per NEP 2020	Heaven's Hospitality Hisar	Hospitality	Training	Food preparation & Serving Skills	02.06.2025
Internship for UG students as per NEP 2020	PK CSC Saral Kendra, Siswala	I.T Services	Training	Computer Skills & Literacy	02.06.2025
Internship for UG students as per NEP 2020	Mahatma Gandhi Institute of Medical Sc., Hisar	Health Care	Training	First Aid	02.06.2025
Internship for UG students as per NEP 2020	GICS Balsamand	I.T Services	Training	Computer Skills & Literacy	02.06.2025
Internship for UG students as per NEP 2020	Chhabildas Memorial Hospital, Balsamand	Health Care	Training	First Aid	02.06.2025

CBL GOVT. COLLEGE Balsamand, HISAR

## Appendix-I

## **Application for Internship Programme**

				•		
. Name of Student:						

2. Fathers Name:

3. Class/Semester:

4. Programme of Admission:

5. Session:

6. College Roll No:

7. University Roll No:

8. Students Id:

9. Mobile No:

10, Email Id:

11. Address:

(i)

(ii)

(iii)

(iv)

12. Period of Internship (Months and session):

13. Internship Preferences:

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Signature of the Student

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## Appendix-II

# Recommendation Letter from Institute to Internship Providing Organization

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Subject: Request for	 04/06 Weeks Into	ernship of Undergr	aduate Student	S
	01/00 1/ 00/10			
Dear Sir/Madam				
It is to inform you that	nt NEP-2020 has n	nade internship man	datory for all un	dergraduate students.
			in doing their	internship at your
organization as being	important and imp	pactful.		
I request your good s	elf to allow our fo	llowing students for	internship in yo	ur organization:
S. No.	Name	Roll No.	Year	Discipline
		HILL TO		
		20 20 20 20 20 20 20 20 20 20 20 20 20 2		
Kindly accord your	permission and c	onvey your consent	in the format of	of Appendix III at the
carliest. It will be	appreciable if on	e-week time is giv	en for students	to join training after
confirmation.				
A line of confirmati	on will be highly a	appreciated.		
Yours sincerely				
Internship Coordina	tor/Supervisor			

## Appendix-III

## Consent of Internship Mentor

1 (Name)	havi	Cs		
organization		dinimini	of Class	
hereby extend my conse	ant to allow the stude	W manuanananananananananananananananananan	at is its the lat	ernshin in the area
Roll No	of Departmen	nt/College/Institute	g/ 10 (10 the me	anning in the over
of		this organization (	during the peri	()(1 )
Mr./Ms./Mrs	or myself will a	et as an Internship	Mentor	
Signature				
	्र म <sup>्</sup> र	Jana Jana		
Name:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	The state of the s		
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Designation;				
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Mobile:	Mad Se	为1000年11月1日 1000日		

Seal of the Organization

### Appendix-IV

### Format of Internship Report

A. Report of Internship for Enhancing the Employability

#### OR

B. Report of Internship for Developing Research Aptitude Points to be covered:

- i. Cover page
- ii. Certificate
- iii. Acknowledgments
- iv. Index of Contents
- v. About the Organization
- vi. Objectives of Internship
- vii. Learning/Research experiences
- viii. Learning/Research outcomes
  - ix. Conclusion/Summary
  - x. Attachments (if necessary)

Cover Page: This is the first page of the report. It should contain the title of the report, name of the student, name of the Internship providing organization. A format of this page is produced on next page and should be adhered to. No logo of the Internship providing organization should appear as this might violate copyright/trademark privileges of the organization/company.

## Appendix-V

## Internship Completion Certificate

It is certified that Mr./Ms./Mrs	S/D/O
ClassRoll. No	of(Department
/ College / Institute) carried out his/her internship	o from to in this
organization in the area of	His performance
'during internship was	(Satisfactory/Good/Very
Good/Excellent)	
Remarks, if any	
Date:	
Signature of Mentor	
Name of Mentor	
Designation:	
Name of Organization:	
Address:	
Email:	
Mobile:	
Scal of the Organization	

## Appendix-VI

## **Evaluation Report of Internship**

Credits: 4			•	
Cremes, 4				

MM: 100

Session:

Pass Marks: 40

Sr. No.	University Roll No.	Marks in Internship on the basis of Report and Viva-	Total Marks (100 Marks)					
KON NO.	Kon wo,	Voce examination awarded by Committee	In Figures	In Words				
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Signature of Internship Coordinator	Signature of Internship Supervisor			
(Name in Capital)	(Name in Capital)			
Designation:	Designation:			
Address:	Address:			
Phone No:	Phone No:			

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