Date:

TO WHOM IT MAY CONCERN

(to be filled by Parent's/Guardian)

I, ______, hereby declare that I am aware of my son/daughter ______, engaging in an internship under the faculty of IIT Jammu. He/She may be solely responsible for his/her own actions during the tenure from ______to _____.

I acknowledge that my son/daughter will be participating in activities relevant to their academic pursuits and professional development under the supervision of the faculty at IIT Jammu. I understand the potential risks associated with working in laboratory environments or on-site and trust that appropriate safety measures will be in place.

I agree to support my son/daughter throughout their internship and to provide any necessary assistance they may require during this period.

Parent/Guardian (Signature)

Student (Counter Signature)