

WORK PROFILE

INDUSTRIAL TRAINING WEEKLY PROGRESS REPORT

From _____ To _____

(To be filled by the student)

Name of the Company/Organisation _____

Address of the Company/Organisation _____

Phone /Fax / E-mail _____

Product /Nature of Work _____

Name of the Student/Trainee _____

Stream _____

College/University Roll No. _____

Training Commenced On _____

Training Closed On _____

Details of Training undertaken during the Period:

Dated: _____

Signature of the Trainee