

INTERNSHIP VALUATION

Session: 2018-19

Total Marks: 50

Name of Organization: _____

Name of Student: _____

Class: _____

Date: _____

Valuation by the Head/Representative of the Organization

Division of Marks	Maximum Marks	Marks Obtained
Attendance and Regularity <ul style="list-style-type: none">90% - 100% - 15 Marks85% - 90% - 13 Marks75% - 80% - 10 Marks	15	
General Conduct <ul style="list-style-type: none">Following the Rules and Regulations of the organization - 02 MarksConduct and Dress - 02 MarksInteraction - 02 MarksCuriosity towards Learning - 02 MarksLeadership and Management - 02 Marks	10	
Knowledge and Working <ul style="list-style-type: none">Basic Knowledge - 06 MarksPractical Knowledge - 06 MarksPreparation of the Report - 06 MarksPresentation of the Report - 07 Marks	25	
Total Marks	50	

Signature and the Stamp of the
Head of the Organization

Contact No: _____

Note: The information provided here are confidential and hence, to be given to the student in a sealed envelope.