

INTEGRAL UNIVERSITY, LUCKNOW

Record of Placement support extended by Faculty Member during the Academic Year 2015-16

1. Name of the faculty.....
2. Employee Code..... Department.....
3. Details of the students placed by sole efforts of the above faculty are as follows.

S. No.	Name of the students	Course	Branch	Year/ Batch	Details of the company in which placed (Name of the company address and contact details of HR)

4. I have solely conducted following activities which have contributed in improving the Training and Placement of students.

- (a)
- (b)
- (c)

(Signature of the faculty)

HoD's Remarks.....
Signature with date.....

CCG&D remarks.....Records updates / verified.

Date Signature

Vice Chancellor.....