



Office of International Relations
Indian Institute of Technology Kharagpur

Student Undertaking to Apply for Foreign Internship

Section A: Applicant details (to be filled in by student)

| | | | |
|-----------------------------|--------------|------------------------------|-----------|
| Name : | SHREY EIOGIA | | |
| Roll Number: | 20PH20036 | Degree enrolled in: | Int. MSc. |
| Department/ School/ Centre: | PHYSICS | Expected date of graduation: | MAY 2025 |

Proposed Foreign internship details (to be filled in by student)

| | | | |
|--|--|--------------------------|-------------|
| Host organization (university/ laboratory) with full address | Laboratoire de Physique de l'Ecole Normale Supérieure, 24 Rue Lhomond, 75005, Paris, France | | |
| Name, title, contact of supervisor/mentor (if available) | Prof. Kay Wiese, Directeur de Recherche au CNRS, email: wiese@lpt.ens.fr | | |
| Title of project/ Name of activity: | Simulation of Self-Avoiding Polymers to verify log-CFT predictions | | |
| Start date of internship: | 03 MAY 2023 | End date of internship : | 25 Jun 2023 |

| | | | |
|--|-------------|----------------|--------------------|
| Source of funding & other support (self/ scholarship): | Agency | Amount awarded | Amount applied for |
| | Charpak Lab | NA | 1400 Euros |

| | | | |
|-------------------------|---|--|--|
| Undertaking by student: | <ul style="list-style-type: none">My internship does not violate any academic schedule or policy of IIT Kharagpur. I take full responsibility for my conduct during my visit and agree to strictly follow all guidelines laid down by my host university and host country and I understand that I am answerable to the Dean IR and Dean SA in case of any misconduct that may harm the Institute's reputation.Once I accept the offer of an internship, I shall not renege on my acceptance nor accept any other offer for internship from CDC/ Dept/ Any other source.I shall keep OIR & CDC informed about internship offers I receive/accept/decline.Failure to comply with the above may adversely affect my placement opportunities | | |
|-------------------------|---|--|--|

| | | | |
|--|--|--|--|
| Post completion requirements (if any): | | | |
|--|--|--|--|

| | | | |
|--------------------------------------|--|--|---|
| I am using this form for (tick one): | <input checked="" type="checkbox"/> An application made through OIR or FTP | <input type="checkbox"/> Requesting NOC from Dean IR | <input type="checkbox"/> Other (specify): |
|--------------------------------------|--|--|---|

| | | | |
|---------------------------------|--------------------------|--|--|
| Signature of student with date: | [Signature] (14/02/2023) | | |
|---------------------------------|--------------------------|--|--|

Section B: Departmental Approval (to be filled in by Dept./School/ Centre)

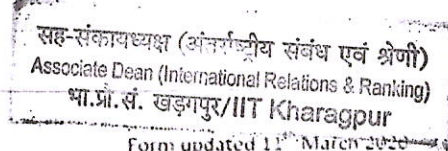
| | |
|--|---------------------|
| Faculty Advisor (signature with date): | [Signature] 14/2/23 |
|--|---------------------|

| | |
|--|-----------------------|
| Head of Dept/ School/ Centre (signature with seal and date): | [Signature] 14/2/2023 |
|--|-----------------------|

Section C: Institute Approval

| | | |
|---|----------------------------|-------------------------------------|
| Chairperson CDC (signature with seal and date): | Verified. [Signature] 24/3 | Prof. Rajakumar A. Chairman, CDC |
|---|----------------------------|-------------------------------------|

| | |
|---|---------------------|
| Dean IR (signature with seal and date): | [Signature] 22/3/23 |
|---|---------------------|



Form updated 11 March 2020

Original Copy Received
[Signature] 23/06/23