



**Geotechnical Engineering Laboratory  
International Institute of Information Technology  
Gachibowli, Hyderabad 500 032, India**

**FORM OF APPLICATION FOR SUMMER TRAINING**

(Please read carefully the general conditions/instructions enclosed herewith before filling the form)

<b>To</b>  <b>Dr. D. Neelima Satyam</b> <b>Geotechnical Engineering Laboratory</b> <b>IIIT Hyderabad 500 032</b> <b>Phone: 91-40-6653 1220/1165</b> <b>Email:lcg@iiit.ac.in</b>
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1	Name in full (in capital letters) Underline Surname)	
2	Father Name	
3	Male/Female	
4	Permanent address:	*b) Address for correspondence:
	Phone No: (including STD Code)	Email Id
5	a) Name of the University/Institution	
	b) Field of Specialization	
	c) Year	
	d) % Marks or CPI	

\* Any change in address should at once be communicated to the office GTE, IIIT Hyderabad 500 032, India

I hereby declare that I have carefully read and understood the instructions and particulars supplied to me and that all the entries in this form are true to the best of my knowledge and belief.

Date:

Signature of the candidate

For office use only:

Above student is recommended for summer training for a period of \_\_\_\_\_ months from \_\_\_\_\_ to \_\_\_\_\_

Date:

Name & Signature of the Supervisor