



University of Kashmir

Institute of Technology, Zakura Campus

Srinagar - 190006



INTERNSHIP PROGRAM REGISTRATION FORM

Form No.: _____	Date: _____
Registration ID: _____	Academic Year: _____

A. PERSONAL INFORMATION	
1. Full Name (In Block Letters)	
2. Father's / Guardian's Name	
3. College / University	
4. Department	
5. Program	
6. Semester	☐ B.Tech ☐ M.Tech ☐ Ph.D ☐ Other: _____
7. Mobile Number	
8. Email ID	
9. Address for Communication	

B. ACADEMIC INFORMATION	
☐ CGPA / Percentage: _____	
☐ Relevant Coursework (if any): _____	



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C. SKILLS KNOWN

- | | |
|-------------------------------------|--|
| ☐ Python | ☐ MATLAB |
| ☐ Networking | ☐ Linux |
| ☐ IoT | ☐ AI/ ML. |
| ☐ C/C++ | ☐ Others: _____ |

D. PRERERRED DOMAIN (Tick one)

- | | |
|--|---------------------------------------|
| ☐ 5G Core | ☐ Open RAN |
| ☐ IoT | ☐ Drones |
| ☐ Smart City Applications | ☐ Other: _____ |

STATEMENT OF INTEREST

Briefly state why you want to join this internship and your expected learning outcome:

Declaration: I hereby certify that the information provided above is true and correct to the best of my knowledge. I agree to comply with all rules, regulations, safety procedures and usage policies of the 5G Use Case Laboratory.

Signature of Applicant

Date: _____