

FORM - S1

${\bf Request\ for\ Letter\ of\ Recommendation}$

To be filled and sent to the concerned faculty

• Dat	te:	
• Nar	me:	
• Clas	ass:	Batch:
• Rol	ll No	
• Cor	ontact Number:	
• Mai	ail ID:	_
• Clas	ass Mentor: Name: De	epartment
• Nar	me of the faculty member you need a LOR f	rom
1		
2		
3		
• Sub	bjects taught by the concerned faculty memb	er (1)
I Year_	·	
II Year _		
III Year	r	
• Sub	bjects taught by the concerned faculty memb	er (2)
I Year_	·	
II Year		
III Voor		

Year						
Y	Year					
}	Year					
	CGPA / Aggregate percentage of marks					
	Name of the Institution to which you are applying for higher studies					
	Details of participation in club activities/ co/extra-curricular activities in college					
	Details of participation in competitions /activities outside college					
	Details of Internship : Organization and role(If applicable)					
	Project work details (If applicable) : Title and name of guide					

Note: The Conege retains the discretion to issue an Lok