



SARDAR VALLABHBHAI NATIONAL INSTITUTE OF TECHNOLOGY,  
SURAT  
सरदारवल्लभभाईराष्ट्रीयप्रौद्योगिकीसंस्थान, सूरत  
DEPARTMENT OF MECHANICAL ENGINEERING  
यांत्रिकइंजीनियरिंगविभाग

MECH. ENGG. DEPT.  
OUT WARD No. 2592  
Date. 06/11/25

Date: 06/11/2025

**NOTICE: Reg. Revised date of Submission of Internship in 8<sup>th</sup> Semester**

**Attn: B. Tech. VII<sup>th</sup> Semester (Mech. Engg.) Students, A.Y. 2025-26**

All the B. Tech. 7<sup>th</sup> Semester students are hereby informed that they have to submit the information regarding their proposed internship (to be commenced from January 2026) in their 8<sup>th</sup> semester in the enclosed form. The **revised date of submission is on or before 19<sup>th</sup> December, 2025**. The completely filled and duly signed form must be submitted in the office of the department. The guidelines for internship are enclosed.

Internship Committee

Dr. S. Kumar

Dr. Sandeep Soni

Dr. S. N. Pandya

*S. Kumar*  
06/11/25  
*S. Sandeep Soni*  
06/11/25

*[Signature]*  
06.11.2025

HOD, DoME,

S. V. N. I. T., Surat.

विभागाध्यक्ष / HEAD

यांत्रिकी अभियांत्रिकी विभाग

Department of Mechanical Engineering  
स.व.रा.प्रौ.सं., सूरत-७ / S.V.N.I.T., Surat-7.

Encl : (1) Internship Form

(2) Guidelines for Internship



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DEPARTMENT OF MECHANICAL ENGINEERING  
यांत्रिकइंजीनियरिंगविभाग

Date: 06/11/2025

**Guidelines for Internship**  
**NOTICE – B.Tech. IV, 8<sup>th</sup> Semester 2025-2026**

1. Students can undertake their internships in industries, IIT or NIT-recognized research labs, government or semi-government organizations, private companies, or incubation centers. They must choose one internal mentor from the department, in addition to their mentor from the host organization.
2. In case students are not getting internship outside institute, Students need to contact faculty as a mentor within department. **The maximum number of 5 students should be allowed under a guide / mentor.**
3. Students undertaking internships within the department must select a faculty mentor from the department to monitor their progress and complete the evaluation process. The mentor will ensure that each student is assigned a separate research topic.
4. Duration of internship as a semester duration minimum (5<sup>th</sup> January – 1<sup>st</sup> May, 2026). The students may start the training before the commencement of the 8<sup>th</sup> semester (i.e, in winter vacation). However student need to produce completion / ongoing progress at the time of evaluation (probably **between 4<sup>th</sup> – 8<sup>th</sup> May 2026**) as the case deemed.
5. The duration of the internship will be for one semester covering not less than 14 weeks time, however in case if internship period at one place is less than semester it can be completed with the following combinations,
  - (i) Outside (as mention in point 1)
  - (ii) Within department
  - (iii) Outside + Outside
  - (iv) Outside + Department
6. No financial burden will be borne by institute towards any expense for internship.
7. Software training/ training course will not be consider as internship.
8. Mentor will seek progress periodically by online/ offline mode.
9. Student will solely be responsible for safety measures at industry / organization etc.
10. Mid Sem presentation of Internship is scheduled on 17<sup>th</sup> March, 2026 in Physical mode.

Internship Committee

Dr. S. Kumar

Dr. Sandeep Soni

Dr. S. N. Pandya

*[Signature]*  
06/11/25

*[Signature]*  
06.11.2025

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**DEPARTMENT OF MECHANICAL ENGINEERING  
यांत्रिकइंजीनियरिंगविभाग**

**B. Tech. IV, 8<sup>th</sup> Semester 2025 – 2026**

**Internship Form**

|                                                                                                                                     |   |                                                                                                                                      |  |              |
|-------------------------------------------------------------------------------------------------------------------------------------|---|--------------------------------------------------------------------------------------------------------------------------------------|--|--------------|
| Name of Students                                                                                                                    | : |                                                                                                                                      |  |              |
| Admission Number                                                                                                                    | : |                                                                                                                                      |  |              |
| Mobile Number                                                                                                                       | : |                                                                                                                                      |  |              |
| Select appropriate option for Internship Work Place other than SVNIT Surat and fill up the following details                        | : | ASHINE/ Industry/Start Ups/ IITs/R & D Organization/ NITs/ @DoME – SVNIT (Strike out other options)                                  |  |              |
| <b>If ASHINE/ Industry/ Start Ups/ IITs/R &amp; D Organization/ NITs is proposed as Internship Work Place (External Internship)</b> |   |                                                                                                                                      |  |              |
| If (ASHINE/ Industry/ Start Ups/ IITs/R & D Organization/ NITs)                                                                     | : | Fill following seven rows (Attach relevant document – sanction letter, or email communication for joining industry/ ASHINE/ Startup) |  |              |
| Name of the work place for Internship                                                                                               | : |                                                                                                                                      |  |              |
| Address                                                                                                                             | : |                                                                                                                                      |  |              |
| Product/Service Profile                                                                                                             | : |                                                                                                                                      |  |              |
| Mentor Name with Designation and Contact Detail (Email and Phone)                                                                   | : |                                                                                                                                      |  |              |
| Problem Statement or Work Assignment/ Area of work (if available)                                                                   | : |                                                                                                                                      |  |              |
| Duration (Tentative)                                                                                                                | : | From (DD/MM)                                                                                                                         |  | Till (DD/MM) |
| Internal mentor (faculty from DoME)                                                                                                 | : | Department Faculty Name                                                                                                              |  | Signature    |
| <b>If SVNIT Surat is proposed as Internship Work Place (Departmental Internship)</b>                                                |   |                                                                                                                                      |  |              |
| If @ DoME - SVNIT                                                                                                                   | : | Fill the following three rows                                                                                                        |  |              |
| Supervisor Name and Sign (Include Co-Supervisor Details if any)                                                                     | : | Department Faculty Name                                                                                                              |  | Signature    |
| Problem Statement or Work Assignment                                                                                                | : |                                                                                                                                      |  |              |
| Student Signature                                                                                                                   | : |                                                                                                                                      |  |              |

**Note:** (1) Copy of Email and/or letter from the organization / Institute (on letter head) must be attached along with this form.

(2) The maximum number of 5 students should be allowed under a guide / mentor.