

The Dean Students' Welfare
University of Delhi
Delhi -110007

Dated:

Subject: Details of the Vice Chancellor Interns requirement:

Name of the office _____

S.No	Number of Interns required	Job Description (which interns can do)	Duration	
			From	To

The interns will be reporting to the _____ and will work under his/her supervision.

Signature of Supervisor

Signature of the Head/ Dean/ Office Incharge
(With office Seal)

Office of DSW

- Approved for _____ interns.
- Period _____ to _____

(DSW office)