

**INTERNAL QUALITY ASSURANCE CELL (IQAC)**

**PROFORMA FOR BEST STUDENT OF THE MONTH AWARD**

**Month and year of Application:………………………………………………………………….**

**Name of the Department: …………………………………………………………………………….**

|  |  |
| --- | --- |
| Name of the Student |  |
| Programme and year of study |  |
| Batch/Group |  |
| Month applying for award |  |
| No. visits made to the Prof VBS Rajan Library |  |
| No. of conferences/seminars/symposium attended |  |
| No. of workshops/training attended |  |
| No. of papers presented in seminar/conference |  |
| No. of extension activities participated |  |
| No. of cultural events particiapted |  |
| No. of hours engaged in research projects/mini projects |  |
| Registration in NPTEL/other online courses |  |
| **Write up in 100 words why you should be selected for the award** |

**Signature of the Student:………………………………………………Date:……………………………………….**

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**FOR OFFICE USE ONLY**

**Confidential Remarks by the HoD**