



Dr. Prasad B. Rampure, M.E., Ph.D
REGISTRAR

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REF: VTU/BGM/906/Internship/2025-26/5562

DATE: **20 JAN 2026**

CIRCULAR

Subject: Internship Organization's registration and confirmation last date extended. Regarding....
Reference: VTU/BGM/...../Internship/873/2025-26/5035, Dated: 24.12.2025
VTU/BGM/...../2025-26/5311, Dated: 06.01.2026
VTU/BGM/901/Internship/2025-26/5400, dated: 10.01.2026
The hon'ble VC sir direction dated: 20.01.2026

All final-year engineering students of the University are hereby informed that the last date for registration and confirmation of the internship organization has been extended to **28th January 2026** up to 5:30 PM.

Students are instructed to report to their respective colleges on 29th January 2026 and go through the Mandatory Internship Guidelines and clarify any doubts with the Internship Coordinator. Colleges are required to conduct Review-0 on 29th and 30th January 2026. The Internship will commence from 2nd February 2026.

All Principals and Internship Coordinators are requested to inform all concerned students and ensure necessary action.

Sd/-
Registrar

To,

1. The Principals of all Engineering Colleges under the ambit of the university.
2. The Chairpersons/Programme Coordinators of university departments at Kalburgi, Belagavi, Mysuru, Talakal and Mundenhall (Bengaluru)

Copy to,

1. The Hon'ble Vice-Chancellor, through the Secretary to the VC, for information
2. Dr. Sanjay H.A., Dean Faculty of Engineering, VTU Belagavi for information
3. The Registrar (Eval) VTU Belagavi for information
4. The Director ITI SMU, VTU Belagavi, for information and request to make arrangements to upload the circular on the VTU web portal.
5. Ms. Rakshitha, Special Officer for Internship, and Ms. Tejaswini, Coordinator for Internship, VTU regional office Bengaluru for information and needful.
6. Office file

Paul/20/01/26
REGISTRAR

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Review-O

Department of _____

Industry / Research Internship (BXX803) Student Summary

Sl. No	USN	Student Name	Nature of the Internship (Stipend / Without Stipend / Paid)	If it is "Stipend", Amount of Stipend in Rs.	Type of Internship (Remote/ Hybrid / Offline)	Name of the organization with the address	Designation and Contact details of the External guide	Start date of the Internship	Remarks
1									
2									
3									
4									
5									

*Add rows as required

Name and Signature of the Internship Coordinator

Signature of the HoD