



Onyxon Project Solutions Pvt. Ltd.

12/122, Uppukkara Street, Kumbakonam-612001. Ph: 0435-2400042

E-mail: edu@onyxon.net Website: www.onyxon.net

INTERNSHIP PROGRAM APPLICATION FORM

Student Name (In BLOCK Letters): _____

Father's Name: _____

Sex: Male Female

Date-of-Birth:

D	D	M	M	Y	Y	Y	Y
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Affix Your
Latest
Photograph

Permanent Address: _____

Mobile No: _____ Telephone No: _____

e-Mail ID: _____

Graduate: UG PG Others Major: _____

College/Institute Name & Address: _____

Telephone No: _____

In-charge Name: _____

Department Name: _____ Mobile No: _____

e-Mail ID: _____

I hereby declare that the above information is complete and correct in all respects and up to the best of my knowledge and belief. Any wrong declaration made above may lead to invalidation of my certificate thereof. I have read all Terms and Conditions mentioned on [Http://www.onyxon.net/internship-program.htm](http://www.onyxon.net/internship-program.htm)

Date: _____

Place: _____ **Student Signature**

Note: Batch timing will be allotted according to suitability of class capacity.
Registration Fee is Non-Refundable.

For Office Use Only

Batch ID _____ Total Fees (Rs.) _____

Batch Timing _____ Receipt No. & Date _____

Received By