**RISK CERTIFICATE**

**A.C.TECH HOSTELS, ANNA UNIVERSITY**

**CHENNAI-25**

DATE:

NAME :

HOSTEL A/C NO :

BLOCK & ROOM NO :

ROLL NO. :

DEPARTMENT :

YEAR :

MOBILE NUMBER :

PARENT’S MOBILE NUMBER :

 I am pursuing\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Programme) in Department of\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Branch) in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_year at A.C.Tech Campus Anna University, Chennai-25. I do here by undertake that I am going for an industrial visit to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ which is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_organized by the Department of\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Departure Time & Date :

Arrival Time & Date :

I take full responsibility of my safety during this trip. I also confirm that my parents have permitted me to go for this industrial visit with my own risk. The Hostel authorities are not be held in responsible for any mishap/ eventualities happened during the trip.

 Student Sign

 Parent’s Sign Class advisor Sign HOD’s Sign

RC Sign Deputy Warden Sign Executive Warden Sign