



FOOD CRAFT INSTITUTE

(Department of Skill Development, UT of J&K)
Banyal Morh, NH44, Nagrota, Jammu - 181221

Dated :-

Dear Guardian,

It is to bring to your notice that the Institute is making innumerable efforts to invite various companies for the purpose of conducting interviews for industrial training at these organizations. Please consider that this requires a lot of efforts and time on the part of the college.

In this regard please acknowledge the receipt of this letter and ensure that the student appears for the upcoming interviews.

Please ensure that he/she appears in as many interviews as required till the desired job is obtained, and must not get disheartened or become irregular. In case your ward does not wish to sit in an interview for industrial training on the part of the college, please intimate us of the same in writing. (Considering that certain students would be going for industrial Training on his own accord). Please update us of the same.

This will help us to focus on only those students who wish to be placed through campus Interviews. You are requested to kindly fill the Training authorization form and forward us the same for efficient and effective training placements.

Thank you in advance for your co-operation.

Regards,

(In-charge Training and Placement)
Food Craft Institute, Jammu

TRAINING AUTHORIZATION FORM

Student PP Size photo

I _____
F/o / M/o _____ fully agree with the enclosed information. I understand and acknowledge that Industrial Training is equal in importance to theoretical foundation in order to get practical exposure of the Hotel/ Hospitality Industry.

In view of this I appreciate if my ward can be accommodated for the Industrial Training programme(24 Weeks as per their Curriculum) and details of the Ward are given below :-

Student Details

Name _____
D/o, S/o _____
Course _____
Enrollment No. _____

Preferred Location for Industrial Training

- 1. **Inside JK UT**
 - 2. **Outside JK UT**
- Specific Location/** _____ **City** _____

Option I _____
Option II _____
Option III _____

State Reasons

Signature of Parent

Contact No.

Date