



VEER SURENDRA SAI UNIVERSITY OF TECHNOLOGY BURLA

ବୀର ସୁରେନ୍ଦ୍ର ସାଏ ଟେକ୍ନୋଲୋଜି ବିଶ୍ୱବିଦ୍ୟାଳୟ

(A UGC Recognized State Government University by an Act of Assembly, Estd. -1956)

P.O. Engineering College, Burla, Dist: Sambalpur, Odisha, (India) -768 018

www.vssut.ac.in e-mail: vc@vssut.ac.in

No. VSSUT/ACD/378 /2026

Dated: 20/07/2026

NOTICE

This is to inform all 7th Semester B.Tech. students opting for **Online Courses (NPTEL/MOOCs/Coursera/L&T EduTech)** or a **Six-Month Internship** in lieu of their elective subjects that they are required to fill out the prescribed form, sign it, and submit it as follows:

1. Students opting for a Six-Month Internship must obtain the signature of the Professor, Training & Placement on the prescribed form. The form must also be verified by the Departmental Digital Course Coordinator before being submitted to the Office of the Head of the Department.
2. Students opting for Online Courses (NPTEL/MOOCs/Coursera/L&T EduTech) and not opting for six-month internship must get their selected course(s) verified by the Departmental Digital Course Coordinator. Thereafter, they must submit the duly signed form to the Office of the Head of the Department.

Memo No. VSSUT/ACD/379/2026

Copy to:

1. All HODs / Deans / Director, IQAC / COE / All Wardens Hall of Residence for information and necessary action.
2. Dean, Faculty and Planning with a request to facilitate in uploading of this notice in the University website.
3. PA to VC for kind information of Hon'ble Vice-Chancellor.

Dean, Academic Affairs

Dated: 20/07/2026

Dean
Academic Affairs
VSSUT, Burla

Dean, Academic Affairs

Dean

Academic Affairs
VSSUT, Burla



No.VSSUT/ACD/ /20.....

Dated:/...../20.....

APPLICATION FORM FOR APPROVAL OF NPTEL/MOOCs / COURSERA/L&T EDUTECH COURSES FOR SIX MONTHS INTERNSHIP / ELECTIVES

1. Name of the student: _____
2. (a) Registration No: _____ (b) Semester: _____
(c) Programme: __B.Tech/B.Arch/M.Tech/MCA/M.Sc/Int.M.Sc/Ph.D: _____
3. (a) Branch: _____ (b) Section (if any): _____
(c) Student Mobile No: _____ (d) E-Mail ID: _____
(e) Name of the Hall of Residence (if Boarder): _____
4. Name of the Company/ Organization for Six months' internship: _____
5. _____

Sl. No.	Name of the VSSUT Subject	Name of the Online Course Opted (NPTEL/MOOCs/Coursera/L&T Edutech)	PC/PE/ OE (No. of Weeks)
1			
2			
3			
4			

6. List of documents enclosed for six months' internship.
(i) Offer / Selection letter.

(Full Signature of the Student)

(For office use)

Verified that the above student has received six months' internship offer.

Signature,

Professor, T&P Cell, VSSUT, Burla

Verified that the subject mentioned above are being offered by Online Course Coordinator (NPTEL/MOOCs/Coursera/L&T Edutech etc.)

Recommended by

Signature
Department Digital Course
Coordinator

HOD
VSSUT, Burla

❖ Filled and signed from should be submitted to respective Head of the Department Office.