



NATIONAL INSTITUTE OF TECHNOLOGY DURGAPUR

Mahatma Gandhi Avenue, Durgapur 713209, West Bengal, India

Department of Mathematics

Website: <https://nitdgp.ac.in/department/mathematics>

Advt. No.: NITD/MA/SERB 22-25/PP/Intern/2024/01/Corr

Date: 08.03.2024

Corrigendum Notice

Applicants are hereby notified to note the following modifications in the advertisement for **Student Internship** (Avdt. No. NITD/MA/SERB 22-25/PP/Intern/2024/01 dated 24.02.2024) and submit the application through email to the undersigned accordingly.

1. Revised Essential Qualification: **Pursuing** M.Sc.or Integrated MSc in Mathematics/Physics.
2. A single .pdf file including filled application form (**proforma is available in the next page**) along with the self attested copies of the marksheets should be submitted to the undersigned through email.
3. Revised last date of submission of application is **15.03.2024**.
4. **No Need** to attach separate **CV and SOP**.
5. Other conditions will remain same as stated in the **Avdt. No. NITD/MA/SERB 22-25/PP/Intern/2024/01 dated 24.02.2024**.

Dr. Pinaki Pal

Principal Investigator & Associate Professor

Department of Mathematics

NIT Durgapur

e-mail: ppal.maths@nitdgp.ac.in

Mobile: 9434788193 (For any query related to the advertisement)



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Application for student internship

Adv. No.:

Date:

(Note: Incomplete applications are liable to be rejected)

1.	Name in CAPITAL	
2.	Father's Name	
3.	Mother's Name	
4.	Date of birth	
5.	Permanent address:	
6.	Correspondence Address:	
7.	E-mail	
8.	Contact No.	
9.	Whatsapp No.	
10.	Details of Educational Qualification (from Matriculation onwards) Please attach the self attested scan copies of the available marksheets.	
	Degree Completed/Pursuing	Board/University
	Subjects Taken	Passing Year
	Class/Division	% of marks/CGPA
11.	Name of the present institution with department	
12.	Statement of Purpose (Why you are willing to join as student intern? Write within 250 words.)	
13.	DECLARATION	
	"I hereby declare that the statements made by me in the above form are true, complete and correct to best of my knowledge and belief."	
	Place:	Signature of Applicant
	Date:	Name: