

Name of the Judge/Govt. Officials/ Advocate/NGO :.....					
Weeks during which the internship was attended: From ..... To .....					
Sr. No.	Roll No.	Section	Name of the Student	Marks in figure	Marks in Words( Out of 5)

Signature of Judge/Govt. Officials/Advocate/NGO

Name & Full Address.....  
 .....  
 .....  
 .....  
 .....  
 Regn. No.(if any).....

**Note:** Kindly Submit the Performa duly filled and signed to department by hand.  
 The Confidentiality is to be maintained at all levels.