



INTEGRAL UNIVERSITY, LUCKNOW

Internship agreement for Student Project work at **Integral Robotics Lab**

1. Student Information:

- Full Name: _____
- Enrolment / Roll Number: _____
- Branch / Department: _____
- Current Year & Semester: _____
- Contact Number: _____
- Official Email ID: _____

2. Internship Details:

- Name of the Organization: Integral Robotics Lab
- Lab Location / Address: _____
- Internship Duration: * From (Start Date):
 - To (End Date):
- Mode of Internship: Onsite Remote Hybrid

3. Project & Research Domain:

- Primary Technical Domain:
 - Autonomous Drones / Swarm Systems
 - Robotic Kinematics & Manipulation (e.g., Multi-DOF arms, Hexapods)
 - Embedded Systems & IoT (ESP32, Sensors, Digital Fabrication)
 - Computer Vision & AI/Reinforcement Learning
 - Other: _____
- Brief Description of the Internship
Project/Work: _____

4. Lab Infrastructure & Equipment Access Request

- Hardware/Tools Required: (Checkboxes for tracking lab resources)
 - 3D Printing / Digital Fabrication Tools
 - Development Boards (ESP32, Arduino, Raspberry Pi)
 - Robotic Testing Arena / Indoor Flight Space
 - High-Performance Computing (GPU) Workstations

I hereby confirm that the above information is accurate, and I seek approval to undertake the internship as per the provided details. I agree to abide by the safety protocols and equipment handling rules of the Integral Robotics Lab. On the successful completion of the internship, I will submit the certificate of completion and the internship report to the department.

Date:

Student Signature: