REQUEST FOR APPOINTMENT OF SUPERVISOR

Name of the Student:			
Roll Numbers of the Student: UG Roll No. PG Ro			
PG Programme of the Student (encircle one):			
M.Tech./M.Des./Ph.D./MS (By Research), Dual Degree			
PG Department/IDP of the Student:			
Details of the Request:			
We agree to the arrangement as proposed above.			
Name;	Name:		Name:
Signature:	Signature:		Signature:
Student	Supervisor		Co-supervisor
DUGC of the Department/IDP has discussed and approved the above request.			
(Convener, DUGC)			

Copy to: Chairperson, SUGC