**Name of the Student:**

**Department: Program: Ph.D./M.Tech.**

**S. R. No: Date of Joining:**

**Date of Comprehensive Exam:**

**Research Supervisor(s):**

**Joint Supervisor Details:**

**Name:**

**University: Designation:**

(Attach an approval letter/e-mail copy from the Joint supervisor clearly stating that he/she agrees to supervise the student)

**Signature of the Student Signature of the Research Supervisor**

**Forwarding Note by the Chair of the Department:**

**Signature of the Chair with date**

**OIR (Office Use Only)**

**Recommendation to the Dean of Engineering/Science:**

**Details of MoU with Joint Supervisor Organization:**

**MoU Signed on: Valid until:**

**Joint Supervision was allowed under MoU: Yes/No**

**Funds available as specified in MoU:**

**Signature of Chair with date**

**OIR**