



**INDIAN INSTITUTE OF TECHNOLOGY BOMBAY
DEPARTMENT OF**

Request for Change/Addition of Supervisor(s)

Date : _____

NAME:	ROLL NO:
PROGRAMME:	CATEGORY :
BASIC QUALIFICATION:	CREDITS COMPLETED / CPI:
DATE OF JOINING:	DATE OF CONFIRMATION :
DATE OF LAST APS :	CURRENT REGISTRATION :
NAME OF SUPERVISOR (<i>Existing</i>): Prof. _____	PROPOSED SUPERVISOR (<i>New</i>) : Prof. _____
NAME OF CO-SUPERVISOR(s)/EXTERNAL SUPERVISOR (if any) (<i>Existing</i>): 1. Prof. _____ 2. Prof. _____	PROPOSED CO-SUPERVISOR(s)/EXTERNAL SUPERVISOR (<i>New</i>) : 1. Prof. _____ 2. Prof. _____

DATE OF CHANGE WITH EFFECT FROM (w.e.f) : _____

REASON /JUSTIFICATION: _____

ENCLOSURES, IF ANY : _____

Student's (Signature with Date)

RECOMMENDATION OF SUPERVISOR(s) : _____

_____ Existing Supervisor (Signature with Date)	_____ Existing Co- Supervisor (Signature with Date)	_____ Existing Co-Supervisor (Signature with Date)
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_____ Proposed Supervisor (Signature with Date)	_____ Proposed Co- Supervisor (Signature with Date)	_____ Proposed Co-Supervisor (Signature with Date)
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RECOMMENDATION OF DPGC/IDPC : _____

Convener, DPGC/IDPC/PGC
Signature (with Date & Stamp)

===== **FOR ACADEMIC OFFICE USE ONLY** =====
REMARKS, IF ANY :

Signature of OS/AR
Date :___/___/___

Convener, PGAPEC