

**Form-B**

**(To be signed by proposed off-campus supervisor to be submitted to concerned HoD)**

I hereby agree to guide Mr/Ms..... ID No.....on the topic  
.....  
.....

I have obtained necessary permissions from my organization for guiding student from BITS Pilani and will follow the guideline regarding evaluation components and grade submission. Dr..... from BITS Pilani ..... campus will be co-guide for above candidate.

(Signature of proposed supervisor)

Date:

Name of proposed supervisor:

Email address:

Phone No:

Postal address: