

Form- A

(Application for Off-campus Thesis; to be submitted by the student to concerned HoD)

A. Name of organization:

B. Is there research collaboration with this organization : YES / NO

C. Name of proposed guide:

D. Full address with Email & Phone No.:

E. Name of the proposed co-guide (A BITS, Pilani faculty):

F. Broad area of proposed work:

G. Summary of work to be carried out with expected deliverables:

ID NO:

Name:

Signature

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Recommendation of Co-guide with comments indicating the need of off-campus Thesis

Signature

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Permitted to apply

(HoD)

(Dean, PS)

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