

**BIRLA INSTITUTE OF TECHNOLOGY AND SCIENCE, PILANI
ACADEMIC GRADUATE STUDIES & RESEARCH DIVISION (AGSRD)**

**STUDENT CHECKLIST FORM FOR SUBMISSION
THESIS FORM – 2**

NAME OF THE STUDENT :

ID NO. :

CAMPUS :

DEPARTMENT :

NAME OF THE SUPERVISOR :

NAME OF CO-SUPERVISOR/S :

TITLE OF THESIS :

I am hereby submitting my thesis in accordance with Clause 8.26/8.27 of Academic regulations of the Institute.

Student's signature
Date:

Countersigned by the Supervisor
Date:

Enclosures (Check the boxes):

- | | |
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| 1. Two spiral bound copies of the thesis – one for each examiner | <input type="checkbox"/> |
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| 10. Thesis Form – 1 & Thesis Form – 2 | <input type="checkbox"/> |
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