

**BIRLA INSTITUTE OF TECHNOLOGY AND SCIENCE (BITS), PILANI**  
**ACADEMIC GRADUATE STUDIES AND RESEARCH DIVISION (AGSRD)**  
**FORMAT FOR APPROVAL OF THE PHD THESIS TITLE (PREFERABLY TO BE TYPED)**  
**(FORM T.1)**

Date: \_\_\_\_\_

**NAME OF STUDENT** :

**ID NO.** :

**DEPARTMENT** :

**CAMPUS** :

To,  
The Convener  
Doctoral Counselling Committee (DCC)  
BITS, Pilani

**Sub: Approval of the Title of Thesis**  
**Through: Proper channel**

Dear Sir,

I am submitting herewith the title of my Ph.D. thesis for the consideration of the DCC. The proposed title\* is as given below:

\_\_\_\_\_  
\_\_\_\_\_

My topic of research approved by the Research Board vide Minutes No. \_\_\_\_\_  
dated \_\_\_\_\_ was: \_\_\_\_\_

\_\_\_\_\_

The title may be approved by the DCC.

Yours faithfully,

(Signature of Student)

Recommendations of the supervisor

Forwarding by DRC

(Signature of supervisor)

(Signature of DRC Convener)

Recommendation of Academic Graduate Studies  
& Research Division

Associate Dean, AGSRD

Dean, AGSRD

\*The Title may be written in "Title Case"

