INDIAN INSTITUTE OF TECHNOLOGY DELHI
Academic Section (Undergraduate)

EXCHANGE PROGRAMME: SUMMARY OF EQUIVALENT COURSES & CREDITS

_____ _____ _____
Student's Name   Entry No.   Programme Code

_____ _____
Name of Foreign Institution   Period of stay (Starting MM/YY & Ending MM/YY)

_____
Period of absence from IITD (give academic year and semesters)

Summary of Equivalence Requested
Student should complete first four columns. Practical training if done abroad should be listed below.

| Course at Foreign Institution | | IITD Course | | Equivalent Credits (approx.) (*) | Category (*) |
Course No.	L-T-P/week, Total contact & credits	Course No.	L-T-P & Credits		

CATEGORY WISE BREAK-UP

CY	MA	PH	ES	EA	ET	HM	DC	DE	OC	TOTAL

Date: _____   Signature of student: _____

(*) To be entered by Chairman, Grades & Registration (UG) before departure: final by Dean (Academics)
Recommendation by Chairman, Grades & Registration (UG) *(To be communicated to student)***:**