



Project Enrollment Form, Department of CSS

Project Title: _____

Brief Description of the Project: _____

Details of Project Group Members: (to be filled-up by group members within 1st October, 2024)

Student Code	Name (in Block Letter)	Phone Number	Signature

Internal Supervisor (to be filled-up by Supervisor)

Name	Designation and Department	Signature

External Supervisor Details (if applicable) *

Name	Organization	Designation	Employee Code	Signature with Date & Official Seal

*(External Guide Form should be
attached, herewith)

Software likely to be used

(1) Front End : _____

(2) Back End : _____

Other Specifications (if any) : _____

(For Official Use only)

Group ID

Stream

Completion within Sept,2024 _____ %

Completion within Oct,2024 _____ %

Completion within Nov,2024 _____ %

Completion within Dec,2024 _____ %

Signature(I.S.) _____

Signature(I.S.) _____

Signature(I.S.) _____

Signature(I.S.) _____