Department of Computer Science and Engineering
Project Registration Form

Student(s) Details

Sl.	ID	Name	Contact No	Email
1				
2				
3				
Course Registered			**Batch**	20____ -- 20_____

Project Details:

Area of Work/Project Title:				
Primary Academic Supervisor Details	**Name**			
	Ph.		**Email**	
Industry Supervisor/ 2nd Academic Supervisor Details (If any)	**Name**			
	Department/ Organization			
	Ph.		**Email**	

Declaration by the Student(s):

I/We have read the Students Project Guidelines document and noted all the details and schedule specified. I/We will not make any significant changes to the assigned project either before or during the project without the permission of supervisor and project coordinator. I/We will do any teaching assistance duty assigned to me/us during the project work by supervisor. I/We will be solely responsible for completion of the above project.

Date:

Signature of the Student(s):

_____

Declaration by the Supervisor:

I declare that the above student(s) is/are assigned to me and I will supervise his/her/their project in the above mentioned area.

_____
Primary Academic Supervisor
(Signature and Date)

NB: The above document is produced only for departmental purpose. It is neither for legal procedure nor for RGUKT Basar administration.