

INDIAN INSTITUTE OF TECHNOLOGY BOMBAY DEPARTMENT OF _____

Request for Extension of Masters' Project Submission/Presentation & Assessment [Refer Masters' rules MR 6.4] Date:

NAME:	ROLL NO:
PROGRAMME:	DATE OF JOINING:
CURRENT REGISTRATION :	CATEGORY:
CREDITS COMPLETED / CPI :	SPECIALIZATION:
NAME OF FACULTY ADVISOR(S) / GUIDE(S): PROF.	ANY PREVIOUS EXTENSION GRANTED: YES/NO
PROF	IF YES, DATE OF PREVIOUS EXTENSION GRANTED TILL:
DUE DATE FOR OF SUBMISSION/ PRESENTATION & ASSESSMENT OF PROJECT [Please tick (√) appropriately]	EXTENSION REQUIRED [Please tick ($$) appropriately]
Stage I : Date :	Stage I : upto date :
Stage II : Date :	Stage II : upto date :
Stage III : Date :	Stage III : upto date :
(Refer Academic Calender for Due Dates)	
ENCLOSURES (if any) :	Student's (Signature with Date)
Supervisor(s) (Signature with Date) RECOMMENDATION OF DPGC/PGC :	Supervisor(s) (Signature with Date)
	Convener, DPGC/PGC Signature (with Date & Stamp)
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	Signature of OS/AR Date ://