

ROLE SPECIFICATION OF TEAM MEMBERS [Form – 2]

[illegible]

MENTOR'S NAME & SIGNATURE

Dr. Priyanka Yadav

NOTE: 1. This form is to be submitted by a team of maximum 4 students in the starting of semester to lab coordinator.
2. Every member student must keep a Xerox copy of this form as reference for his / her part in project work.
3. Students must provide the detailed list of planned activities along with their completion deadline dates.
4. The lab coordinator will check the weekly progress of student against the information provided in this form.

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