

IIIT RK Valley, RGUKT-A.P.

PROJECT REGISTRATION FORM

Name of the Project (or Project area):

Project Guide(s) : <u>soundarya</u>

Group members (if any):

SNO	ID NO	NAME	CONTACT NO	EMAIL ID
1	r141001	R.Yogendra	8179637403	r141041@rguktrkv.ac.in
2	r141040	R.Yogendra	8179637403	r141041@rguktrkv.ac.in

(To be filled by Students)

I declare that the foregoing information is correct. If at any time, my information found to have concealed, my project can be rejected. I will not change my project or project advisor without the permission of project in-charge. I will do any teaching assistance duty(if any) assigned to me during my project work by my advisor. I will be solely responsible for completion of the above project.

Signature of Students

1.

3.

4.

(To be filled by Students)

I declare that the above students are assigned to me and I will guide their project in the above- mentioned area.

Signature of Advisor