HINDUSTAN
INSTITUTE OF TECHNOLOGY & SCIENCE
(DEEMED TO BE UNIVERSITY)

Form No: HITS/DRC/ PhD/021

DIRECTORATE OF RESEARCH AND CONSULTANCY
CHANGE OF SUPERVISOR APPLICATION

Name of the Scholar :

Reg. No :

Date of Registration :

Department :

Official e-mail id :

Topic of Research :

Research Area of the Scholar :

Name of the Present Supervisor with designation :

Reason for Change of Supervisor :

Name of the Proposed Supervisor designation & Research area :

Official Mail ID of Proposed Supervisor: :

:

No. of Vacancy for Proposed Supervisor :

I have no objection to transfer my Research Scholar to ----------

Signature of the Present Supervisor

Consented and Accepted the Research Scholar for guiding and supervising

Signature of the Proposed Supervisor

Signature of Ph.D. Coordinator Signature of HoD Assoc. Dean Research

Vice Chancellor