

Request for Internal Supervisor Allocation for Doctoral Program

Full-Time

Part-Time

Name of Student: _____

SAP ID: _____

Enrollment Batch: _____

Phone No. _____

Area of specialization: _____

As per my interaction with faculty member, I am Requesting to allocate the supervisor from the following list. I understand that anyone of them can be allocated as my supervisor.

Date: _____

(Signature of Student) _____

S. No.	Research Area	Name of Faculty Member	Signature
1			
2			
3			

Research Coordinator of school

Signature with Date

Recommendation by Associate Dean R & D and Dean R&D

On the basis of suitability of Research Interests of the PhD student and the faculty members; and the availability of seats with the faculty member (s), I hereby recommend that the above-mentioned faculty member may be approved as the supervisor/s.

Associate Dean R&D

Dr DK Avasthi, Dean R & D

Approved/ Not Approved

Dr Ram Sharma
Vice Chancellor, UPES