

Date: _____

Request for Supervisor Re-allocation for Doctoral Program

Name of Student: _____

SAP ID: _____

Enrollment Date: _____

Phone No.: _____

Title of PhD Work: _____

As per my interaction with faculty member, I am Requesting to re-allocate the Ph.D. supervisor.

(Signature of Student) _____

Existing Supervisor: _____

Existing Supervisor Research Area: _____

No objection from Existing Supervisor with Signature: _____

Reason for Re-allocation: _____

Proposed Supervisor Name: _____

Proposed Supervisor Research Area: _____

Consent of Proposed Supervisor with Signature: _____

Name of Research Coordinator

Signature with Date

Recommendation from R&D Department:

On the basis of suitability of Research Interests of the PhD student and the availability of seats with the faculty member (s), the above-mentioned faculty member may be approved as the supervisors.

Dr Pankaj Kumar
Associate Dean R&D

Dr Ashwini Kumar Nangia
Dean R&D

Approved/ Not Approved

Dr S.K. Rai
Vice Chancellor, UPES