

**BIRLA INSTITUTE OF TECHNOLOGY AND SCIENCE, PILANI
HYDERABAD CAMPUS**

ACADEMIC - UNDERGRADUATE STUDIES DIVISION

FIRST/SECOND SEMESTER (20 - 20)

Pre-Registration Form for First Degree Thesis (Abroad)

Date:

Name of the Student _____

ID No. _____ Discipline _____

Course No.: _____ No. of units intending to register for (9 to 16): _____

Broad area (brief):

E-mail ID: _____

Phone Number: _____

Contact details of the Supervisor (Organization in Abroad):

Name & Address of Organization: _____

Name of Supervisor _____

E-mail ID: _____

Office Phone Number: _____

Name of Co-Supervisor (A BITS Pilani Faculty) : _____

Signature of the Student

Signature of the Supervisor

Signature of the Co-supervisor

Recommendation of HoD:

Signature of HoD

Forwarded

Signature of Associate Dean, IPCD