

BIRLA INSTITUTE OF TECHNOLOGY & SCIENCE, PILANI
Academic-Undergraduate Studies Division

Form- A

(Application for Off-campus Thesis/ Dissertation; to be submitted to concerned HoD)

A. Name of organization:

B. Is there research collaboration with this organization: YES / NO

C. Name of proposed Supervisor:

D. Full address with Email & Phone No.:

E. Name of the proposed Co-supervisor (BITS Pilani faculty):

F. Broad area/title of the dissertation (brief):

G. Summary of work to be carried out with expected deliverables:

ID NO:

Name:

Signature

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Recommendation of Co-supervisor with comments indicating the need of off-campus Thesis

Name & Signature of Co-supervisor

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Permitted to apply

(HOD)

(Associate Dean, PS)

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BIRLA INSTITUTE OF TECHNOLOGY & SCIENCE, PILANI
Academic-Undergraduate Studies Division

Form- B

(To be signed by proposed Supervisor and to be submitted to concerned HOD)

I hereby agree to guide Mr./Ms. ID No. on
the topic
.....

I have obtained necessary permissions from my organization for guiding student form BITS
Pilani and will follow the guideline regarding evaluation components and grade submission.
Prof./ Dr. from Department of
....., BITS Pilani, _____ Campus will be Co-supervisor for
the above candidate.

(Signature of proposed supervisor)

Date:

Name of proposed supervisor:

Email address:

Phone No.

Postal Address:

(Signature of on-campus Co-supervisor)

Name:

For official use

Signature of HoD

Signature of Associate Dean, AUGSD

**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

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

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 (BITS Pilani, Hyderabad Campus):

Name of Supervisor _____

Name of Co-Supervisor (if any) _____

Signature of the Student Signature of the Supervisor Signature of the Co-supervisor

Recommendation of HoD:

Signature of HoD

Name:

Suggested format of initial communication with proposed off campus supervisor by the student



Birla Institute of Technology & Science, Pilani
Hyderabad Campus

Dear _____

I, Mr./Ms. _____ of BITS Pilani, Hyderabad Campus, India, am requesting permission to do a First Degree Thesis (1st/2nd semester) in your organization. The thesis, which is a requisite for the degree of the institute in various disciplines, is envisaged as training for future research in specific disciplines and areas. Since this is offered as a registered course there are various evaluation components and time lines to be met. I would be obliged if I could have your response to the following points mentioned in order for. I would be obliged if I could have your response to the following points mentioned in order to enable me to initiate the process

- 1) What are the eligibility criteria for selecting student for thesis work?
- 2) Number of positions available for thesis work?
- 3) How much stipend will be given to the student?
- 4) What sort of assistance is available for accommodation of students?
- 5) Is the proposal one time offer or is it going to continue in future also?
- 6) Will you agree for having a co-supervisor from BITS-Pilani?

I am enclosing the First Degree Thesis handout along with this mail. Kindly go through it and let me know whether you would fulfill all the necessary academic formalities like sending grades etc. as per the requirement of BITS-Pilani. Please feel free to contact me for any further clarifications.

Sincerely,

Suggested format for communication with off-campus supervisor for procedural modalities



Birla Institute of Technology & Science, Pilani
Hyderabad Campus

Dear _____

As per your acceptance of Mr./Ms. _____, student of BITS-Pilani, Hyderabad Campus, India to do a First Degree Thesis (1st/2nd semester) in your organization, kindly note the following:

- a. _____, from the department of _____ has been assigned as co-supervisor for this course.
- b. Kindly communicate with us the date on which our student joins your organization
- c. If the student registers off-campus, kindly sign on his/her registration card
- d. Conducting evaluation of the students (as per the handout) is the collective responsibility of the off-campus supervisor and the departmental co-supervisor along with an external examiner.
- e. Kindly follow the deadlines mentioned in the handout to communicate the grades to us.

Sincerely,



Birla Institute of Technology & Science, Pilani
Hyderabad Campus

No Objection Certificate from the Department to the Organization

To whomsoever it may concern

This is to certify that Mr./Ms. _____ bearing ID No. _____ is a student of BITS Pilani, Hyderabad Campus and is permitted to carry out her/ his First Degree Thesis at _____ (Place of work) under the guidance of _____ (Name of the Supervisor at the place of work) during _____ (Start Month) till _____ (End Month).

Date:

Signature of HoD

Name:

Department