



ACADEMIC OFFICE
NATIONAL INSTITUTE OF TECHNOLOGY, TIRUCHIRAPPALLI – 620 015

MS (by Research) GENERAL TEST COMMITTEE PANEL SUBMISSION FORM

Name of the Scholar	
Roll Number	
Department	
Date of Registration	
Type of Registration	Full Time (Institute Scholarship / Project) Part Time(Sponsored)–External /Part Time- Internal Others (Specify)
Name and Designation of Guide	
Research Area	

Panel Proposed by the Research Guide

Chairman: One Senior faculty member from the concerned department [to be nominated by the research Guide]

1. Name, Designation, Department

Internal Member: One faculty Member [to be nominated by the Dean (Academic)]

1. Name, Designation, Department

2. Name, Designation, Department

External Member: One technical expert (external) from leading industry / national laboratories / academic institutions [to be nominated by the Dean (Academic)]

1. Name, Designation, Department or Organization address

2. Name, Designation, Department or Organization address

Signature of the Guide

Head of the Department

Associate Dean/Dean (Academic)

(Note: please send hard copy of this form to PhD Section and photo copy of this form to phdsection@nitt.edu)