



CHOICE OF GUIDE [for Full Time Ph.D. candidates]

Name (in Capital letters)	
Roll Number	
Type of Registration	INSTITUTE SCHOLARSHIP (HTRA) / OTHER FELLOWSHIP (QIP / ICCR / TEQIP / JRF / CSIR / DST / DAE / NBHM / etc.) / PROJECT / NON-STIPENDIARY
Department	
Broad Area of Research	

Sl. No.	Name of the Faculty	Signature	
		Willing to guide	Not Willing to guide

Choice of Guide

- 1.
- 2.
- 3.

Signature of the Scholar with date

Guide should be allotted as per Ph.D. current regulations

Guide Allotted

- 1.

Date:

Head of the Department

(Note: please send hard copy of this form to M.S. / Ph.D. Section and photo copy of this form to phdsection@nitt.edu)