

3.2 Format for submitting the course work

BIRLA INSTITUTE OF TECHNOLOGY AND SCIENCE PILANI, _____
CAMPUS
DEPARTMENT OF _____

Date:

To,
Associate Dean, AGSRD
BITS Pilani, _____ campus.

The suggested course package for following PhD candidates is given below:

Sr. No.	Application no./ID No.	Name of the candidate	I/II semester 20 - 20		I/II semester 20 - 20	
			Courses	Units	Courses	Units

(Name)_____

(DRC Convener)

Date:

(Name)_____

(HOD)