Form-B

(To be signed by proposed supervisor to be submitted to concerned HOD)

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I hereby agree to guide Mr/Ms ID N on the topic	
I have obtained necessary permissions from my organization student from BITS Pilani and will follow the guideline regar components and grade submission. Dr	ding evaluation
from BITS Pilani campus will be co-guide for ab	ove candidate.
(Signature of proposed supervisor)	Date:
Name of proposed supervisor:	
Email address:	
Phone No:	
Postal address:	