Indian	Institute	of	Technology	Indore

Application Form for Students

Name:	Roll Number			
Academic Program:	Category of Admission(For PG/PhD)			
Department/Specialization	Contact No			
То				
AOAA/ Associate Dean of Academic Affairs/ De Indian Institute of Technology Indore Khandwa Road, Simrol Indore – 453552, India	ean of Academic Affairs			
Through Proper Channel	Date:			
Subject:				
Respected Sir,				
Number of relevant supporting documents atta	ached:			
	Signature of the student with date			
Remarks of the thesis supervisor(s) (For PG and PhD)/ Faculty Advisor /Course Coordinator (for selection/adjustment of elective course) / BTP Supervisor (For BTP and related internship) (For UG):				
	Name & Signature with date			
Remarks of the Convener, DPGC (For PG and				
	Name & Signature with date			
Remarks of the Head:				
	Name & Signature with date			
For use	by Academic Office			
Remarks of DR/ AO, Academic Affairs:				
Remarks of Associate Dean, Academic Affairs	(PG and PhD)/ Associate Dean, Academic Affairs (UG)			
	Name & Signature with date			
Dean, Academic Affairs:				
	Name & Signature with date			
Director/ Dean of International Affairs & Outrea	ach			