



INSTITUTE OF AERONAUTICAL ENGINEERING

(Autonomous)

Dundigal, Hyderabad - 500 043

APPLICATION FOR SUPERVISOR / CO-SUPERVISOR CONSENT FROM THE HEAD OF THE INSTITUTE

1	Name of the faculty act as a Supervisor / Co-Supervisor					
2	Designation of the faculty					
3	Area of Interest					
	1.					
	2.					
4	Student details					
	Student name					
	Registered university					
	Branch / Specialization					
5	Consent: Supervisor / Co-Supervisor					
6	Research publications in the last five years (Enclose the list of publications)					
7	Number of Ph.D scholars guided / registered in any university and pursuing Ph.D under the guidance (Enclose the proofs).					
	S.No	Major area and Specialization	Title of the Thesis	Name of the Scholar	Name of the university awarded the degree	Month & Year of Awarded / Ongoing
8	Approval of Head of the department	Recommended / Not recommended				
9	Approval of Dean of Planning, Monitoring & Continuing Studies (PMCS)	Recommended / Not recommended				
10	Approval by the Head of the Institution	Approved / Not Approved				

Date:

PRINCIPAL

Copy to:

1. Dean – IQAC
2. Dean – R & D
3. Concerned Head of the Department