

# Indian Institute of Technology Kharagpur

## DSC Approval/Recommendation for joining Joint Doctoral Program (JDP)

Name:

Roll no:

Hall of Residence:

Date of enrolment IITKGP:

Name of Host Institute:

Proposed duration of stay at Host Institute:

Total months completed as Ph.D Student:

Reason for visiting Host Institute:

Full address of correspondence during Absence:

Supervisor(s)

Name, Dept/School/Center	Email/Phone

Recommendation of the DSC (Please tick as applicable)

The research student has

1. Completed the prescribed course work.
2. Fulfilled the minimum residential requirement of first year
3. Completed the comprehensive examination.
4. Completed registration seminar

<i>Signature of the Home Supervisor</i>	<i>Signature of the Head of the Department/Centre/School</i>	<i>Signature of the DSC Member, IITKGP</i>
<i>Signature of the DSC Member, IITKGP</i>	<i>Signature of the DSC Member, IITKGP</i>	<i>Signature of the DSC Member, IITKGP</i>