

National Institute of Technology Manipur

FORM: 10 CHANGE / ADDITION / DELETION OF A SUPERVISOR

DEPA	RTMEN	ГОБ			
Name	of the Stu	udent		Enrollment No.	Date of Registration
	SI. No.	Existing Supervisor(s)			Department
	1				
	2				
	consent of	culty is recommended to the student, the existing Name			ent for Inclusion
			-		
	f laint	0	·		
		Supervisor] culty has opted out to b	e the supervisor of th	e student	
he foll	owing fac		Department	e student Reason	Signature
he foll	owing fac	culty has opted out to b	•		Signature
he foll	owing fac	culty has opted out to b	•		Signature
SI. No.	owing fac	Name Sulty has opted out to be the substitution of the substituti	Department		
SI. No.	e of a Sin	Name Sulty has opted out to be the substitution of the substituti	Department	Reason	
SI. No.	e of a Sin	Name Name Sulty has opted out to be the supervisor] Sulty is recommended a	Department as supervisor of the s	Reason	urrent supervisor

Chairman, DPPC Chairman, IPPC Chairman, Senate