

3.18 Format for recommending extension of time limit for submission of thesis (to be submitted subsequent to completion of 5 years after Ph. D. qualifying examination)

BIRLA INSTITUTE OF TECHNOLOGY AND SCIENCE PILANI, _____ CAMPUS
DEPARTMENT OF _____

RECOMMENDATION FOR EXTENSION OF TIME LIMIT FOR SUBMISSION OF THESIS

Date:

To,
Associate Dean, AGSRD,
BITS Pilani, _____ campus.

We are forwarding herewith the recommendations for extension of time limit for submitting Ph. D. thesis for following candidates for your kind perusal and necessary action. The request letters for these candidates duly forwarded by their supervisor(s) are attached herewith. The progress of these candidates has been evaluated by DAC members.

Sr. No.	ID. No	Name of the candidate	Name of the supervisor(s)	Extension requested upto	Expected date of thesis submission

_____(Name)_____

(DRC Convener)

Date:

_____(Name)_____

(HOD)