

3.1: Format for approval of DRC

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

Date :

To,

The Director
BITS Pilani, K K Birla Goa campus.

Subject: Approval for Reconstitution of Doctoral Research Committee

Dear Sir,

We request you to kindly approve the following reconstituted members of the Doctoral Research Committee (DRC) for the Department of _____.

1. _____ : HOD, ex-officio member and Chairperson
2. _____ : Convener
3. _____ : DRC members
4. _____

Reasons for reconstitution: _____

The existing members of the DRC are:

1. _____ : HOD, ex-officio member and Chairperson
2. _____ : Convener
3. _____ : DRC members
4. _____

Thanking you,

Yours sincerely,

Forwarded

(Chairperson / HOD)

(Name: _____)

(Associate Dean, AGSRD)

(Name: _____)

Approved / Not Approved

Director