



APPLICATION FOR CHANGE OF SUPERVISOR

DD	MM	YYYY

01	Full Name of the Student:	
02	Name with Initials:	
03	Registration Number:	

Name of the previous supervisor:	
Name of the new supervisor:	
Reason for change:	

Remarks from previous supervisor:									
Signature:		Date:	<table><tr><td>DD</td><td>MM</td><td>YYYY</td></tr><tr><td></td><td></td><td></td></tr></table>	DD	MM	YYYY			
DD	MM	YYYY							

New Supervisor's Consent:

I am willing to guide these students in all phases of above-mentioned project as supervisor. I have carefully seen the Title and description of the project and believe that it is of an appropriate for the student named above.

Email Address:							
Signature:							
Date:	<table><tr><td>DD</td><td>MM</td><td>YYYY</td></tr><tr><td></td><td></td><td></td></tr></table>	DD	MM	YYYY			
DD	MM	YYYY					

Note: Supervisor Can Not BE changed without prior consultation of the Software Development Project Coordinator.

For DMIT Office use only

<input type="checkbox"/> Recommended	<input type="checkbox"/> Not Recommended	<input type="checkbox"/> Approved	<input type="checkbox"/> Not Approved
Name and signature of the Software Development Project Coordinator		Signature of the Head of the Department of MIT	