



FORM No. : IITG/ACIR/13

ALUMNI, CORPORATE AND INTERNATIONAL RELATIONS

IITG STUDENT (MASTERS / DOCTORAL) VISITING FOREIGN
UNIVERSITY UNDER LOTUS OR SIMILAR EXCHANGE PROGRAMME

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Exchange Related Data:

1.	Name of the Host University	
2.	Name of the Exchange Program / Fellowship / Other	
3.	Name of the Department and Contact Person with his/her Email ID of the Host University	
4.	Name of the Program at Host Institute:	
5.	Period of visit:	From: To:

Personal Data:

6.	Name of the student:	
7.	Academic Program at IIT Guwahati:	
8.	Department/Centre/School:	
9.	Roll No:	10. Current Semester:
11.	Gender:	
12.	Have you successfully defended your SOAS?	
13.	Health Insurance done	YES / NO
14.	Are you availing any Institute Fellowship? If Yes, please mention.	
15.	Do you have unsatisfactory progress / Academic deficiencies/ disciplinary proceedings against you?	Y/N
16.	Academic Leave:	Approved / Applied
17.	Email ID:	
18.	Mobile No.:	
19.	Details of recent overseas visit:	
a.	Program:	

b. Duration:
c. Source of fund:

Justification for applying for the program: Please type in the box below

Declaration: I declare that the research carried out by me during this exchange program will be a part of my thesis.

(Student's signature)

Declaration by the Supervisor: I declare that the research carried out by the student during this exchange program will be a part of his/her thesis.

(Signature of the Supervisor)

Name:

Declaration by the DPPC Secretary: I confirm that the visit will not adversely affect departmental responsibilities.

(Signature of the DPPC Sec.)

Name:

Forwarded:

HOD/ HOC/ HOS

HOS, ACIR

Permitted / Not Permitted

Dean, ACIR