भारतीय प्रौद्योगिकी संस्थान गुवाहाटी

INDIAN INSTITUTE OF TECHNOLOGY GUWAHATI

FORM NO. : IITG/ACIR/11 **ALUMNI, CORPORATE AND INTERNATIONAL RELATIONS**

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

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.	**Type of the Program at Host Institute:**	**INTERNSHIP / STUDENT EXCHANGE / OTHER** **If OTHER, please mention:**
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: M / F / Other**	**12. Health Insurance done: YES / NO**
13.	**Have you successfully defended your SOAS?**	
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