|  |
| --- |
| **MALAVIYA NATIONAL INSTITUTE OF TECHNOLOGY JAIPUR****FORMAT FOR CONVERSION FROM FULL TIME TO PART TIME IN M.TECH./Ph.D. FROM \_\_\_\_\_\_ SEMESTER DURING THE ACADEMIC SESSION 20\_\_\_\_** |

**PART A**

**TO BE FILLED BY THE STUDENT**

1. Name of the Candidate\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2. ID Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 3. Specialization/Ph.D. topic\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Mobile No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 5. Email ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. Dept. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 7. Year of registration as full time candidate\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8. Type: Sponsored/Self Finance/Institute Assistant/QIP/TEQIP Assistantship/JRF/SRF Assistantship from other sources (Please √)

9. Reason of conversion from Full time to Part time: employment/other: (Please √ the relevant). In case of employment furnish the following details:

1. Name of Employer
2. Date of appointment
3. Attach appointment and joining letter
4. NOC from the employer permitting the student to continue in Part time M.Tech./Ph.D. programme.
5. Academic performance.
6. If awarded Ph.D. candidacy (applicable to Ph.D. students if so date of award\_\_\_\_\_\_)
7. If the course work has been completed (applicable for M. Tech./M. Plan . students)

 So furnish the details:

|  |  |  |
| --- | --- | --- |
|  | **1Year** | **2 Year** |
| **SGPA** |  |  |
| **CPGA** |  |  |

1. Furnish the details of back log courses if any.

**Date: \_\_\_\_\_\_\_\_\_\_\_ Signature of the student**

**PART-B**

**FOR OFFICIAL USE ONLY**

Recommendation of the Supervisor; Recommended/Not recommended for conversion from full time to part time

**Date: \_\_\_\_\_\_\_\_\_\_\_\_ Signature of Supervisor**

Recommendation of DPGC Convener; Recommended/Not recommended for conversion from full time to part time.

**Signature of Convener DPGC**

Approved /Not approved for conversion from full time to part time.

**Date: Signature of Chairman SPGB**

**Signature of Associate Dean (PG)**

**Dealing assistant (Academic Section)**