

Request for co-guidance of a degree student in collaboration with another institution

Co-guiding a student towards Ph.D. may add strength to an ongoing collaboration involving the concerned student. As the student/co-guide may belong to JNCASR/another institution, certain formalities are required to be followed as detailed below. It is important that no additional burden on the Centre's infrastructure is caused based on the collaborative activity. Further, the Faculty member requesting for the arrangement, should take the responsibility of the overall well-being of the student.

1. Faculty member proposing the collaboration:

Unit:

2. Name of the Faculty member from the collaborating institution:

Institutional address:

Contact details:

Home page URL:

3. Name of the student to be considered for co-guidance:

Registered with (*Tick as appropriate*)

JNCASR ☐

Collaborating Institution ☐

Other ☐

If Other, give details:

Note: The Faculty member belonging to the institution where the student is registered, becomes the primary guide; the other, by default, will be the co-guide.

Date of registration:

SR or equivalent No.:

Student's Consent attached? ☐

GSAC/Doctoral committee recommendation as regards the present proposal, enclosed? ☐

If the student is from outside, NoC/permission from the competent authority, enclosed? ☐

Consent of the external supervisor, enclosed? ☐

4. Does this proposal draw reference to a valid MoU between the Centre and the collaborating institution? If Yes, does the MoU contain any provision for co-guidance of degree students? Give details including terms and validity period. ☐

5. Details of the Research project/topic that the student will be carrying out:

Reasons for collaboration, give details: ☐

6. Places of work and expected spells/durations, semester-wise over the total period of co-guidance: ☐

7. Give details of the infrastructural requirements at the Centre such as hostel accommodation:

If NIL, indicate it as well. ☐

8. Give details of the intellectual property (IP) sharing agreement: ☐

9. List possible conflicts of interest that may arise during the collaboration:

Signature of the Faculty member:

Date:

Recommendations /Remarks by the Chair of the Unit:

Signature:

Date:

Academic Office

1. List of students currently being supervised by the Faculty member:

2. Minutes of the meeting held by the designated committee:

Recommendations /Remarks by the Dean Academic Affairs:

Signature:

Date:

For the approval of the President:

President