Name of the Department

Phone: +8802334490113, Fax: 031-714910, PABX: 031-714920-22 (2180 & 2181)

## Thesis/Project Proposal Approval Form

Application for the approval of Ph. D./M. Sc. Engg./M. Engg./MURP/M. Phil./M. Sc. Program **Thesis/Project Proposal** 

Name of Supervisor						
Thesis/Project Title						
Thesis/Troject Title		•				
<b>Details of Stude</b>	nt:					
Student's Name		:				
Student ID		:	Session :			
Admission Status		:	Full time / Part time ( Put √ Mark )			
Program Name (Put √ Mark)		:	Ph. D./M. Sc. Engg./M. Engg./MURP/M. Phil./M. Sc. Program			
Date of First Enrolment		:	THE DAME OF LINGS AND THE AND THE AND THE SECOND COMMENTS.			
Student Mobile No.		:				
Student Email ID		:				
	D	eta	ails of Completed Courses by	the Stude	ent	
Course Code			Course Title	Credit Hours	Letter Grade	GPA (Published Result)
N.B.: Approval	l from Doctor	al	Committee (Only for Ph. D. Pr	rogram)		
11				<u> </u>		
Signature of Course Coordinator				Signature of Tabulator		
Cost Estimate: (Invoice/Quotat	ion must be	e p	provided for each and every it	em cost T	CK. 25,000.	.00 and more)
			the total budget of the Thesis/I Project Implementation Rule.	•	-	
Remarks of Sup	ervisor	:				

Signature & Date:

## Directorate of Research and Extension (DRE)



Chittagong University of Engineering & Technology E-mail: dre@cuet.ac.bd; Website: www.cuet.ac.bd

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(Student) (Supervisor) (Head of the Department)