Swedish college of Engineering & Technology

Change Of Supervisor Request

It is here by requested that I/ we request the concerned committee to grant us permission to change our Project/Thesis supervisor.

Group Details

S No	Name	Semester	Department	Roll

Supervisor and Project Details

Supervisor Name		
Project Title		
	Signature Supervisor	
	Date	
	========For Office Use Only ==================	
File Number	_	
Approval Status		
Principal Signature _	ncipal Signature HOD Signature	