

CENTRAL LIBRARY

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Ta. Waghodia, Dist. Vadodara-391510 (www.itmbu.ac.in)



FORM NO. 5 (THESIS/PROJECT/PRACTICAL TRAINING REPORT) Fill up all the details in Block letters

Name of the Student	
Roll No./Enrollment Number	
School/ Department	
Name of Degree	
E-mail ID	
Date	
Name of the Supervisor(s)/Guide(s)	
Title of the Thesis/Dissertation	

Student Declaration

I want to issue Thesis / Reports / Practical Training Project reports for Academic purpose only with permission of dean of our department. I shall be obliged to take care of it; I will be responsible if damaged or lost. I will return the Thesis/Report within 7 days from the date of issue.

Date:

Signature of Student

Office Use (Academic Affairs)

Comments (if any) Date:

Signature of Dean (Academic Affairs)

Office Use (Central Library)

Comments (if any):.....

Signature of Librarian