



Indian Institute of Technology Hyderabad  
Kandi, Sangareddy – 502285, Telangana

---

## M.Phil./M.Tech./PhD Fellowship Form

---

Name of the Student:

Roll No.:

Year of Joining :

Department :

Stream:

Scholarship Month :

No. of Days Attended:

Amount of Stipend:

Type of Scholarship : CSIR/UGC/DAE/DST/AMS/MHRD/Others (if any)

Project : CPS/DISANET/

Student / Scholar Signature

Name:

Date:

---

**Remarks:**

Signature of the Supervisor

Name :

Date:

Signature of faculty

(allocated for TA)

Name:

Date: