## NATIONAL INSTITUTE OF TECHNOLOGY KURUKSHETRA

### STEPS FOR AVAILING LAB/EXPERIMENTAL FACILITIES AT THE INSTITUTE BY M.TECH (2<sup>nd</sup> YEAR) /Ph.D STUDENTS (FULL TIME)/PROJECT STAFF

This is with reference to MHA Order No. 40-3/2020-DM dated 30.9.2020 regarding permission to M.Tech/Ph.D students for availing lab/experimental facilities at NIT Kurukshetra. The Institute is in process of assessing the lab. work requirements by M.Tech. (2<sup>nd</sup> year)/Ph.D. students (Full Time)/Project Staff. All such students whose such research/project work requires experimentation may apply through the annexed form by 23.10.2020 to the concerned HoD/School Coordinator through their supervisors. After receiving the requests, the schedule will be prepared by HoD/School Coordinator of the concerned department/school and communicated to the students. The procedure for applying for lab. work is mentioned below:

- 1. The consent of parents/spouse is mandatory.
- 2. The student will send the duly filled form to his/her supervisor by e-mail.
- 3. The supervisor of the student will verify that lab/experimental facilities requested by the student are necessary for the student's PhD/M.Tech thesis/dissertation/research work and forward the application to HoD/School Coordinator for recommendation.
- 4. HoD/School Coordinator will forward the list of such students in compiled form with his/her recommendations to the office of Dean(Academic) by 28.10.2020.
- 5. The student will be informed by the concerned department/school after assessing the situation and arrangements in the Institute for the safety of all concerned.

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#### Copy to:

- 1. All Deans
- 2. HoDs/School Coordinators
- 3. Prof. I/C (CCN) with a request to upload it on the Institute website.
- 4. Sr. Secretary to Registrar
- 5. AR to Director for kind information of the Director.

#### ANNEXURE

# NATIONAL INSTITUTE OF TECHNOLOGY KURUKSHETRA

## APPLICATION BY M.TECH (2<sup>nd</sup> YEAR) /Ph.D STUDENTS (FULL TIME)/PROJECT STAFF FOR LAB/EXPERIMENTAL WORK AT THE INSTITUTE

			DATE
NAME	E OF STUDENT	ROLL NUMBER	
DEPARTMENT		PROGRAMME	(Ph.D/M.Tech)
LAB(S	5) FACILITY REQUIRED		[Name of Lab(s)]
PERIOD OF USE OF LAB(S)		(Mention dates as per requirement)	
HOST	EL REQUIREMENT	(M	ention no of days, if Yes)
Under	rtaking by the Student		1
· i.	I am not coming from containment zone.		
ii.	I shall follow all the COVID-19 protocols as issued by Ministry of Health from time to time.		
III.	The lab(s) facility requested as above is essential for my PhD/M.Tech thesis/dissertation/research work.		
Signat	ture of Parent/Spouse		Signature of Student
NAME	E & DESIGNATION OF SUPERVISOR	1	
DEPA	RTMENT		•
	rtaking by Supervisor of the Student		
i.	The lab(s) facility requested as above is essenti	al for his/her PhD/M.Tech thesis/diss	ertation/research work.
ii.	The lab. work will be monitored by me.		
III.	The student(s) will be allocated labs in such a manner that social distancing and other protocols will be maintained as per guidelines of Ministry of Health issued from time to time.		
Date:_			Signature of Supervisor
The re	equest of the candidate is (Recommended/Not Rec	commended)	
	-		
	School Coordinator to ensure that:		
i. 	Sanitization of the labs will be carried out on regular basis.		
ii.	Thermal scanning of the students will be carried out at the concerned department/school. Social distancing and other protocols will be maintained as per guidelines of Ministry of Health.		
iii.	Social distancing and other protocols will be ma		y of Health.

iv. The student(s) will follow the approved schedule for the use of lab(s).

Date: