

Phone: 0389 - 2391236 / 2391774 / 2391699 Email: registraroffice@nitmz.ac.in Website: www.nitmz.ac.in

## Consent form for B. Tech Students willing to do their Final Year at IIT Madras

| I | I, bearing Roll No |
|---|--------------------|
|   | O                  |

from\_\_\_\_\_ district, \_\_\_\_\_ State,

S/O or D/O of\_\_\_\_\_\_ presently studying in the

\_\_\_\_\_ semester in the Department of \_\_\_\_\_\_

Engineering, National Institute of Technology Mizoram hereby give my consent of willingness and wish to continue my Final Year of my B. Tech programme at IIT Madras according to the MoU between NIT Mizoram and IIT Madras.

Name of the Student:

Signature of Student:

Date:

Name of Parent/Guardian:

Counter-signed of Parent/Guardian:

Date: