MADURAI KAMARAJ UNIVERSITY DIRECTORATE OF DISTANCE EDUCATION **MADURAI**

DEPARTMENT	OF	•••••	• • • • • •
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PROJECT GUIDE WILLINGNESS FORM			
I. Stu i.	dents Details: Name of the Student:		
ii.	Registration Number:		
iii.	Address:		
	Mobile Number:	E-mail ID:	
II. To	pic:		
III. G	uide Details:		
i.	Name, Mobile and Email:		
ii.	2. Academic Qualification:	(NET / SET)	
iii.	Subject:		
iv.	Designation:		
v.	Institution:		
vi.	Teaching / Industry Experience:		
I am v Stude	willing to guide nt of DDE, Madurai Kamaraj University, Ma	Department ofdurai.	
	fied that I,iences as furnished in the proforma.	possess the qualifications and	
Signa	ture of the Student	Signature of the Guide with seal	