Application to Pursue an Online Course
Semester _____ Year _____

Name :   **Roll number:**

Course Title *(From offering institution)*:

Course Subject Area *(e.g., CS or Economics)*:

Institution/Organization offering the Course *(Full name and URL)*:

Whether the course has been pre-approved by IIIT-D:

Supervising Faculty at IIIT-D:

Credits *(to be filled by supervising faculty at IIIT-D)*:

Prerequisites:
(From offering institution, supervising faculty, pre-approval (as applicable))

Post condition:
(From offering institution, supervising faculty, pre-approval (as applicable))

Course Plan:
(From offering institution)

Course Time line:
(Tentative start and completion dates)

Evaluation and Assessment:
(To be filled by supervising faculty)

_____   _____
signature of student, date   signature of supervising faculty, date