



BRAINWARE UNIVERSITY

398, Ramkrishnapur Road, Barasat, North 24 Parganas, Kolkata - 700 125

Project Application Form

SEMESTER No. _____

Date: _____

Name of the Student(s): _____ Student Code(s): _____

Department: _____ Program: _____

Area of focus/specialization of the project: _____

Title of the project: _____

Tentative work plan: _____

Outcome of the project: _____

Name and Signature of the supervisor with date

Designation: _____