

I-STEM Software Request - Guide Approval Form

User Details

- **Name of Researcher:** Shashikant K Shinde
- **User Type:** Ph.D. Scholar
- **Institution Name** : Yashwantrao Chavan Institute of Science, Satara (Autonomous), Maharashtra.
- **Institutional Contact No:** 02162234392
- **Research Topic:** Microfluidics Lab on Chip for Agriculture applications

Software Request Details

- **Software Name:** Comsol
- **Justification for Software Request:** Comsol will be used for Simulation

Guide/Supervisor Approval

I, Shinde Shashikant

- Confirm that the above-mentioned researcher is affiliated with our institution
- Have reviewed the software request and its relevance to the researcher's academic work
- Approve the software request for research purposes

Approval Confirmation

- I approve the software request
- The software aligns with the researcher's research objectives
- The request meets the institutional research guidelines

Guide/Supervisor Signature: _____

Date: 14/12/2015 **Head**
Department of Electronics
Y.C. Institute of Science, Satara

Official Stamp/Seal: [Space for Institutional Stamp]

Important Notes

1. This form must be signed and scanned
2. The scanned copy must be uploaded with the software request
3. Electronic signatures are acceptable if from an official institutional email

