

I-STEM Software Request - Guide Approval Form

User Details

- **Name of Researcher:** DAKSHAYINI M R
- **User Type:** [v] Ph.D. Scholar
- **Institution Name :** MALNAD COLLEGE OF ENGINEERING HASSAN
- **Institutional Contact No:** 08172245317
- **Research Topic:** PHOTONICS CRYSTAL BASED STRUCTURAL DESIGN ANALYSIS FOR BIO SENSING APPLICATIONS

Software Request Details

- **Software Name:** COMSOL MULTI PHYSICS
- **Justification for Software Request:** [Provide detailed explanation of how the software supports your research objectives]: AS I AM WORKING UNDER THE DESIGNING OF PHOTONICS CRYSTAL BIO-SENSOR, FOR SIMULATION DESIGN I NEED THE SOFTWARE.

Guide/Supervisor Approval

I, Dr. TRIVENI C L (Guide/Supervisor Name),

- 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: _____

Dr. C. L. TRIVENI

Ph.D, SM, LE, LMISTE

Associate Professor

of Electronics & Communication

College of Engg, HASSAN-573 102

Official Stamp/Seal: [Space for Institutional Stamp]