

I-STEM Software Request - Guide Approval Form

User Details

- Name of Researcher: Pauline Jay
- User Type: ☐ Ph.D. Scholar ☐ Postdoctoral Researcher ☐ Bachelor's ☒ Masters
- Institution Name: Dayananda Sagar University
- Institutional Contact No: 9525146046
- Research Topic: Bacterial Pathogenesis

Software Request Details

- Software Name: CONSOL
- Justification for Software Request: [Provide detailed explanation of how the software supports your research objectives] I will be using CONSOL multiphysics purely for Institutional research purpose to study bacterial motility

Guide/Supervisor Approval

I, Dr. Kumar Perinbam (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: 3-03-2026

Official Stamp/Seal: [Space for Institutional Stamp]

Important Notes

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

Assistant Professor.

Department of Biological Sciences

School of Basic and Applied Sciences.

Dayananda Sagar University

Innovation Campus

Kud - Gate Hosur Main Road,

Bengaluru - 560 114.