

Declaration

(On Institute's Letterhead)

This is to certify that, Mr./Ms _____, Enrolment Number _____, is a Bonafide student of _____ (Department, Institute/University Name). S/he is enrolled in the first year of _____ (course name along with discipline).

It is hereby declared that the candidate is a full-time (Master's/PhD) student and is not availing any other fellowships.

Signature with Seal of Supervisor:

Signature with Seal of Head of Department:

Name:

Name:

Designation:

Designation:

Email:

Email:

Phone:

Phone:

Signature with Seal of Head of Institute:

Name:

Designation:

Email:

Phone: