

CERTIFICATE
(By the Principal/Registrar on letterhead)

Date:

Dr/Mr/Ms(Name).....,(Designation), has been appointed as coordinator and Dr/Mr/Ms(Name).....,(Designation), as Deputy coordinator for conducting the summer/winter school for school students/school teachers/UG students. Our institute has all the facilities and will be extended to conduct this programme. We shall abide by all the terms and conditions of the grant for conducting this school. The institute will take responsibility for submitting all the documents after the event, including the Report, attendance sheets, feedback forms of participants, UC and Statement of expenditure.

Signature (Principal/Registrar):

Name

Seal