this is to certify that Mr/Ms	student of
permitted to do internship for Resear This college/Department has No Obje	is ch Award (ASPIRE) as per his/her request ection to do internship under the guidance of
I	Principal/HOD/Address of the Institution
office seal)	

CONSENT LETTER

I hereby declare my willingness to act as towards Research Award (ASPIRE) programme entitled	of DCE (2024-25) on proposal
(office seal) Date:	Signature: Name: Designation:

Joining Report

Ref:.....Dated:....

As per the reference cited above. Mr/Ms
Home/ Institution Address)
Has joined the
Principal/HOD/Address of the Institution
office seal)
Date: