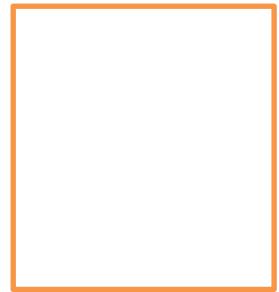


BONAFIDE CERTIFICATE



(Recent Photo of the applicant)

This is to certify that _____ (Name of the applicant),
Son/Daughter/Ward of _____ (Parents/Guardian's name)
, Born on _____ (dd/mm/yyyy).

Belongs to _____ (Community/Tribe Name) Scheduled Tribe, domicile
of _____ (District), _____ (State). [ST Certificate
issuing state]

He/She is a **bonafide** research scholar of _____
(University/ Institute), which falls under category;

- i. Universities/Institutes/Colleges included under section 2(f)/12(B) or 2(f) and 12(B) of UGC Act.
- ii. Deemed to be Universities included under Section 3 of the UGC Act, 1956 and eligible to receive grant-in-aid from UGC.
- iii. Universities/ Institutes/ Colleges receiving grants by Central/ State Government
- iv. Institutes of National Importance, as notified by Ministry of Higher Education, Government of India.

[put tick mark in which your University/Institute belongs to]

He/She has joined/admitted/registered the course _____ [M.Phil. / Ph.D. / M.Phil.+Ph.D (Integrated)] for the Stream _____ on _____ (date**) bearing Registration Number/Admission Number. _____ for the academic year 20____-__.

*[Note**: The date from which you have Joined/ Registered/ Took admission for the course, and accordingly your University/Institute counting actual tenure of that course as per University/Institution's norms]*

Name-
Designation-
Official contact Number-
Mail Id-

(Signature with Seal Of
HOD/Principal/Dean/Director)