

**Study Certificate for Grant of Saksham Scholarship**

**(To be issued by Director / Principal / Head of the Institute)**

It is certified that Shri/Smt/Kumari ..... (Student name) S/o, D/o, Shri..... (Father name) is admitted in ..... Course for the academic session 2019-2020 through centralized counseling in .....college having Permanent Id (PID) 1-.....

Date:\_\_\_\_\_

Place:\_\_\_\_\_

**Signature of the Head of the Institute with Seal**