**Recommendation from the Principal/Head of the Department**

I recommend Dr./Mr./Ms………………………………………………………………………….

(Designation)……………………………………….…………………………………………………

(Institution)……………………………………………………………………………………………

for joining the On-Line Workshop in………………………………………………………….

…………………………………………………………………………………………………………..

He/she will be relieved and treated on duty during the duration of the above course at UGC Human Resource Development Centre, AMU, Aligarh, if selected. Certified that this College is affiliated to ………………………………………………………………………………………………………………University for the last five years.

Date………….. Signature of the Principal/Head

 With official Seal