CERTIFICATE OF PRESENTATION (KNOWLEDGE SHARING) IN THE DEPARTMENT

A. Personal Particulars

Name		**DOJ**	
E. Code		**Qualification**	
Department		Designation	

B. Details of FDP/WKSP

S. No.	Information	(Kindly fill the details)
1	Host Institution	
2	Topic	
3	Date of attendance in host institution	
4	Number of Days/ Duration	
5	Date of notice of presentation in the department – sent to RC (Chairman) for information	
6	Date of presentation in the department (Knowledge Sharing)	
7	Number of attendees	

C. Application Submission Details

Date of submission of an application		Signature of the applicant	

D. Remarks by HoD

Date Signature of HoD