**NOMINATION LETTER**

This is to certify that Dr/Mr./Ms./Prof. …………………………………………………… is working as ............................................... in the Department of ……... ................................. University/College/Institute ................................................ ....................................................... w.e.f. …...........……......

Hereby, he/she is permitted for attending the Faculty Development Programme entitled ‘**National Education Policy 2020-Orientation and Sensitization Programme’** to be conducted by the UGC-Malaviya Mission Teacher Training Centre, Central University of South Bihar **(MMTTC-CUSB)** Gaya- 824236 (BIHAR) from **30th July** to **7th August, 2024** (Excluding Sunday) through **Online Mode (10:00 AM** to **1:30 PM).**

|  |  |
| --- | --- |
| Place: | Signature |
| Date: | (Head of Institution/Principal/HoD)  (with Seal) |