

## CERTIFICATE OF AICTE RECOGNITION

This is to certify that .....

.....

(Name of the college / Institute)

..... as well as the academic department to which Mr./Ms.

.....belongs are recognised by AICTE.

(Name of the candidate)

**Signature of Head of the Institution/  
Competent Authority**

**(OFFICE SEAL)**

***To be submitted to :***

**Coordinator  
Quality Improvement Programme  
Continuing Education Centre  
Indian Institute of Technology Roorkee  
ROORKEE - 247 667**