

**Employer’s Endorsement Form**

To be submitted on official letterhead, dated & signed by the competent authority with the Shastri Publication Grant (SPG) for 2020-21. The form must be signed by the Vice-Chancellor/ Registrar /Dean/ /Director/Principal.

**Name of Proposed Project/Programme:**

**Faculty Name:**

**Address with email:**  \_\_\_\_\_\_\_\_\_\_\_\_\_

**Contact No:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name of Vice-Chancellor/Director/Dean:**

**Email:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Contact No:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I have no objection and I approve the application of (Name of Faculty) \_\_\_\_\_\_\_\_\_\_\_\_\_\_ for Shastri Publication Grant (SPG) I also verify that he/she is full-time tenured faculty at the University/ Institution/College.

\_\_\_\_\_\_\_\_

**Signature of Vice-Chancellor/Registrar/ Date**

**Dean /Director/ Principal**