

Certificate

This is to certify that Dr/Mr./Ms.**Panmeshwari Paikra**.....of.....**MBADM 2...**(batch) of**Samerth Cheritable Trust**.....(name of department/institute)has worked with our organization for his/her summer internship from.....**1/5/2023**.....to.....**23/6/2023**.....(date) the work carried out by him/her and performance shown by him/her during the period was found excellent/very good/good/average. This certificate is being issued to meet the requirement of the university.

Date: 23/6/2023

(Signatures of supervisor)

Name and designation of signatory

Seal/stamp of the organization



Trust Registration No. : E-9150/Ahmedabad

PAN No. : AACTS9428G

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