



Completion Certification CERTIFICATE (Annexure A)

This is to certify that Dr./Mr./Ms. Sahil Pralhad Mohape of DM2021-23 (batch) of IIHMR University (Name of the department/institute) has worked with our organization for his/her summer internship from 11/04/2022 to 31/05/2022 (date)

The work carried out by him/her and performance showed 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: _____

(Signature of Supervisor)

Ms. Kiran Waghmare, Project Coordinator
- Jeevan-EA

Name and Designation of Signatory



Seal/Stamp of the Organization