**Monthly Attendance Record**

|  |  |
| --- | --- |
| Name of the Awardee |  |
| Name of Scheme &Duration of Fellowship |  |
| Name and Address of Host Organisation |  |
| Name and Affiliation of the Host Mentor |  |
| Contact details of Host Mentor  |  |

**Certificate**

This is to certify that Dr./Mr./Ms./Mrs. ………………………………….. has been working under my mentorship and has performed his/her work satisfactorily during the month of………………………………

|  |  |
| --- | --- |
| Name of the Host MentorSignature of the Host Mentor with seal  | Name of the AwardeeSignature of the Awardee |