

(On office letterhead of the organization)

Endorsement Letter

IGSTC Paired Early Career Fellowship in Applied Research (PECFAR) Award

This is to certify that the _____ *<Name of Parent Institution/Organization>* provides its confirmation on the following:

1. _____ *<Title, Name of the Applicant, Designation, Affiliation>* is permitted to undertake the research visit at the _____ *<Name of Host Organization>* for the collaborative project titled _____ *<Title of the PECFAR project>*, under the Paired Early Career Fellowship in Applied Research (PECFAR) program of Indo- German Science & Technology Centre (IGSTC). The institute has no objection for scheduled visit from _____ *<DD/MM/YYYY>* to _____ *<DD/MM/YYYY>*.
2. The PECFAR Applicant _____ *<Name of the Applicant, Designation, Affiliation>* has been employed at the institution since _____ *<DD/MM/YYYY start date>* and holds an active contract valid until _____ *<DD/MM/YYYY contract end date>*.
3. The institution will host _____ *<Name of the Paired Applicant, Designation, Affiliation with Institutional details>* under the PECFAR program for a period scheduled from _____ *<DD/MM/YYYY>* to _____ *<DD/MM/YYYY>*.
4. The details provided by _____ *<Name of the Applicant>* in the PECFAR application form, including Date of Birth, details of Employment and Education are correct and as per the institute records.
5. The grant-in-aid from the Indo-German Science & Technology Centre (IGSTC) will be used to cover travel and fellowship expenses for the approved visit period. The institute will not be charging institutional overhead or management charges in any form for facilitating the PECFAR Award.
6. The institution will provide access to the premises, basic infrastructure and other required facilities for the PECFAR Pair to undertake the research project as per the requirements of the project.
7. The institution will provide the required documentation to IGSTC and undertakes responsibilities to timely disburse the Grants sanctioned to the awardee. Institute ensures to provide management efforts for successful completion of the PECFAR Award.

Date:

Name & Designation of Authorised Signatory at the Institution:

Seal of Institute/Organisation

Signature

Signatory at the Institution)

(Authorised