This is to certify that _____*(Full Name of Student)* is a bona fide student of the_____*(Name of Department, Name of Institute/University)*. **He/She** has been enrolled in this Department since the_____*(Date of admission)* and is currently pursuing the final year of the_____*(Name of the Degree)* program, with Roll Number_____*(Roll No.)* and Registration Number_____ *(Registration No.)*.

I further declare that:

1. The **six-month** short-term training is a mandatory requirement for the partial fulfilment of **his/her** degree program.
2. **He/She** is presently in the final year of the said program and meets the eligibility criteria prescribed by NII.
3. During the training period, **he/she** will be available full-time at NII.
4. All intellectual property rights and data generated during the training will remain the property of the National Institute of Immunology (NII).
5. The training is strictly for academic and research purposes, and **he/she** will comply with all rules and regulations of the host institute.
6. **He/She** will undertake the research training as assigned by the PI at NII.
7. A co-PI from our **University/Institute** may be included solely for administrative purposes, if required by the degree program. **(Please select: Required / Not Required)**
8. Our **University/Institute** has no objection to _____*(Name of Student)* undertaking the **six-month** short-term training at NII.

I hereby recommend and fully support **his/her** application for the **six-month training** at NII and kindly request your consideration.

Date:

Place:

Signature and seal of Head of Department/Institute

Full name:

Official address:

Email and contact number: