



## MAHARAJA BIR BIKRAM UNIVERSITY

P.O.: Agartala College- 799 004

Dial :( 0381) 251 2250, 251 2252, 251 2254

Email: [mbbuniversityagt@gmail.com](mailto:mbbuniversityagt@gmail.com)

Annexure-I

Maharaja Bir Bikram University  
Agartala, Tripura

Date:

### Teaching Performance

### TO WHOME IT MAY CONCERN

This is to certify that Prof./Dr./Mr./Ms. \_\_\_\_\_ (Name),  
\_\_\_\_\_ (Designation) of the Department of \_\_\_\_\_  
has taken/taught \_\_\_\_\_ (percentage of classes) and graded with \_\_\_\_\_  
(Good/Satisfactory/Not-Satisfactory) for the Academic Session \_\_\_\_\_.

I wish his/her success in life.

Head/In-Charge of the Department/  
Dean of the Faculty/  
One of the Senior Faculty Member



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Annexure-II

Maharaja Bir Bikram University  
Agartala, Tripura

Date:

### Administrative Experience

### TO WHOME IT MAY CONCERN

This is to certify that Prof./Dr./Mr./Ms. \_\_\_\_\_ (Name),  
\_\_\_\_\_ (Designation) of the Department of \_\_\_\_\_  
has discharged function as Head/Chairperson/ Dean/ Director/ Co-ordinator/Warden/In-Charge  
etc. w.e.f. \_\_\_\_\_ to \_\_\_\_\_.

I wish his/her success in life.

Head/In-Charge of the Department/  
Dean of the Faculty/  
One of the Senior Faculty Member



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Annexure-III

Maharaja Bir Bikram University  
Agartala, Tripura

Date:

## Examination and Evaluation

### TO WHOME IT MAY CONCERN

This is to certify that Prof./Dr./Mr./Ms. \_\_\_\_\_ (Name),  
\_\_\_\_\_ (Designation) of the Department of \_\_\_\_\_  
has performed all Examination and Evaluation duties assigned by the University for the  
Academic Session \_\_\_\_\_.

Details of Examinations:

- 1.
- 2.
- 3.

I wish his/her success in life.

Head/In-Charge of the Department/  
Dean of the Faculty/Controller of Examinations



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Annexure-IV

Maharaja Bir Bikram University  
Agartala, Tripura

Date:

### Co-Curricular Activities

### TO WHOME IT MAY CONCERN

This is to certify that Prof./Dr./Mr./Ms. \_\_\_\_\_ (Name),  
\_\_\_\_\_ (Designation) of the Department of \_\_\_\_\_  
has performed Student related co-curricular, extension and field based activities such as  
\_\_\_\_\_ (student clubs, career counseling, study visits, student seminars  
and other events, cultural, sports, NCC, NSS and community services with details of concerned  
events) for the Academic Session \_\_\_\_\_.

I wish his/her success in life.

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Annexure-V

Maharaja Bir Bikram University  
Agartala, Tripura

Date:

### **Workshop/Seminar Organized**

### **TO WHOME IT MAY CONCERN**

This is to certify that Prof./Dr./Mr./Ms. \_\_\_\_\_ (Name),  
\_\_\_\_\_ (Designation) of the Department of \_\_\_\_\_  
has organised \_\_\_\_\_ (Seminars/  
Conferences/ Workshops/ other University Activities/National Webinar/International Webinar  
etc.) on \_\_\_\_\_ (Topic)  
as \_\_\_\_\_ (Convener/Organising Secretary) on \_\_\_\_\_ (Date).

I wish his/her success in life.

Head/In-Charge of the Department/  
Dean of the Faculty/  
One of the Senior Faculty Member.



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Annexure-VI

Maharaja Bir Bikram University  
Agartala, Tripura

Date:

## PhD. Guidance

### TO WHOME IT MAY CONCERN

This is to certify that Prof./Dr./Mr./Ms. \_\_\_\_\_ (Name),  
\_\_\_\_\_ (Designation) of the Department of \_\_\_\_\_  
has actively involved in guiding Ph.D. students.

Name of the Scholar	Title of the Thesis	Date of Registration	Date of Submission of Ph.D Thesis	Date of Award
1.				
2.				
3.				

I wish his/her success in life.

Head/In-Charge of the Department/  
Dean of the Faculty/ Controller of Examinations.



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Annexure-VII

Maharaja Bir Bikram University  
Agartala, Tripura

Date:

## Project

### TO WHOME IT MAY CONCERN

This is to certify that Prof./Dr./Mr./Ms. \_\_\_\_\_ (Name),  
\_\_\_\_\_ (Designation) of the Department of \_\_\_\_\_  
has conducted a \_\_\_\_\_ (minor or major research project) sponsored by  
\_\_\_\_\_, titled \_\_\_\_\_  
of the amount of Rs. \_\_\_\_\_ and the project has been  
sanctioned on \_\_\_\_\_ vide letter  
no. \_\_\_\_\_. The project report has been  
submitted on \_\_\_\_\_ (Date).

I wish his/her success in life.

Head/In-Charge of the Department/  
Dean of the Faculty/  
One of the Senior Faculty Member/Finance Officer



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Annexure-VIII

Maharaja Bir Bikram University  
Agartala, Tripura

Date:

### Research Publication

### TO WHOME IT MAY CONCERN

This is to certify that Prof./Dr./Mr./Ms. \_\_\_\_\_ (Name),  
\_\_\_\_\_ (Designation) of the Department of \_\_\_\_\_  
has published one article titled \_\_\_\_\_ in the  
\_\_\_\_\_ (Name of the Journal) as  
\_\_\_\_\_ (single/Joint Author) on \_\_\_\_\_ (Issue Number & Month,  
Year of Publication) . The Journal is \_\_\_\_\_ (Peer Reviewed/ UGC Listed  
Journal).

I wish his/her success in life.

Dean of the Faculty/  
One of the Senior Faculty Member





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Annexure-IX

Maharaja Bir Bikram University  
Agartala, Tripura

Date:

## Dissertation Guidance

### TO WHOME IT MAY CONCERN

This is to certify that Prof./Dr./Mr./Ms. \_\_\_\_\_ (Name),  
\_\_\_\_\_ (Designation) of the Department of \_\_\_\_\_  
has actively involved in guiding Post Graduate students for Dissertation.

Name of the Student

Title of the Dissertation

Date of Submission

- 1.
- 2.
- 3.

I wish his/her success in life.

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Dean of the Faculty/  
One of the Senior Faculty Member



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Annexure-X

Maharaja Bir Bikram University  
Agartala, Tripura

Date:

### Curriculum Design

### TO WHOME IT MAY CONCERN

This is to certify that Prof./Dr./Mr./Ms. \_\_\_\_\_ (Name),  
\_\_\_\_\_ (Designation) of the Department of \_\_\_\_\_  
has designed the following new courses/curriculum for Under Graduate/Post Graduate/Ph.D  
Programmes.

Title of the new Course/Curriculum

Year  
(on which the Course/  
Curriculum has been introduced)

- 1.
- 2.
- 3.

I wish his/her success in life.

Head/In-Charge of the Department/  
Dean of the Faculty/ Controller of Examinations