NOC CERTIFICATE

| Reference Number: | Date: |
|--|------------------------------|
| Dear Sir or Madam, | |
| This is to certify that Mr. / Ms. / Mrs We have no objection if he is admitted to the PhD. program in as a Part Ti | at |
| The Organisation will grant him / her leave of absence to attend classes his / her PhD program. | s / research works at during |
| Company Name: | |
| Address: | |
| Contact: | |
| Signature: | |