Self-Declaration Certificate

Respected Sir/Madam,
I am aware of the
Integrated Ph. D. Program currently underway at Atmiya University
(Rajkot), offered by the Faculty of Transformative Education (FoTE). I
am willing to contribute research work in the light of Madhyasth Darshan
philosophy. I am interested to enrol myself in the Integrated Ph. D.
Program.
I am self-declaring
that I have been actively participated in a program called Jeevan Vidya
Parichay Shibir / Capacity Building Programme – National Conference /
International Conference / Sammelan on Jeevan Vidya / Adhyayan or
Pathan of Book in the light of
Madhyasth Darshan Philosophy from to
to support my application. I am willing understanding
and practicing Madhyasth Darshan Philosophy with a total span of
years and days.
The attended program was based on Madhyastha Darshana
Philosophy (Existence is co-existence) propounded by Shri A. Nagraj. I
was a part of this program under the guidance of mentor Shri
at the institution / institute
located in the village/city
Yours Sincerely,
Name of the Applicant:
Address:
Contact Number:

Consent Certification

Ι,						
(Facilitator's				hereby	approve	that
	· · · · · · · · · · · · · · · · · · ·		(N	lame of th	ne Applican	t) has
actively particip				van Vidya	Parichay S	hibir /
Capacity Buildi	ing Progra	ımme d	on Jeevan Vid	ya / Adhya	yan or Path	nan of
Madhyasth Da	rshan (Sa	h-Astitv	vavad) Philoso	phy propo	ounded by S	Shri. A
Nagaraj.						
I conforr	n that the	e infor	mation provid	led in the	Annexure	∍-1 is
accurate to the	best of m	y know	vledge.			
Furtherm	ore, I am	please	d to inform tha	at the part	icipant's bel	navior
during the pro	gram was	s exen	nplary, comme	endable a	nd their co	nduct
was also praise	eworthy.					
Sign of Facilita	tor with In	stitutio	nal Seal			
Facilitator / Ins		Stitutio	nai Ocai			
	utution					
Name of the In	stitute:					-
Name of the Fa	acilitator: _					
Address:					 	
Contact No.:						

Note: If any candidate will submit consent letter from any Institute or Institution then an applicant has to submit the consent letter on the letter of the Institute or Institution.

Annexure- 1

क्रमांक (S. No.)	अध्ययन कर्ता के नाम (Participant's Name)	कार्यक्रम का नाम (Program Name)	तिथि (Dates)	अवधि (No. of Days / Hours)	स्थली (Place)	प्रबोधक/प्रस्तुति कर्ता का नाम (Facilitator's Name)
1						

Facilitator's Details

<u>Facilitator's Details</u>
I, (Facilitator's
Name), residing in
(Facilitator's Full Address) and I am affiliated with the
(Name of Organization /
Institution / NGO) for the past years (from to).
I have been studying literature based on Madhyasth Darshan
(Sah-Astitvavad) Philosophy and also practicing the same in my day to
day life. I have pursued the study of literature on Madhyasth Darshan
under the guidance of Shri A. Nagaraj Ji /
Sign of Facilitator with Institutional Seal Facilitator / Institution
Name of the Facilitator:
Address:
Contact No.: