

UNIVERSITY GRANTS COMMISSION
WESTERN REGIONAL OFFICE
GANESHKHIND PUNE-411007

ACCEPTANCE CERTIFICATE FOR RESEARCH PROJECT

Name :-**Dr. Taware VilasMadhukarrao**

No.F:- **23-1724/10 (WRO) dated – 05/10/2010**

Title of the Project :- “**Dr. DevishingChavanachyaDakhiniHinditilIthasSanshodhanacha
ChikistakAbhyas**”

1. The research project is not being supported by any other funding agency.
2. The terms and conditions related to the grant are acceptable to the principal Investigator and University /College/Institution.
3. At present I have no research project approved by UGC and the accounts for the previous project, if any have been settled.
4. The College/University is fit to receive financial assistance from UGC and is included in the list prepared by the UGC.
5. The Principal Investigator is a retired teacher and eligible to receive honorarium as he/she is neither getting any honorarium from any agency nor is he/she gainfully employed anywhere.
6. His/her date of birth is :- **05/04/1968**
7. The date of implementation of the project is :- **05/10/2010**

Principal InvestigatorCo-Investigator

Registrar/Principal