[College Letterhead] [Institution Name] [Department Name]

Date: [DD/MM/YYYY]

**Subject: Authorization Letter for PG/SR to Attend and Present at KAPICON 2025**

This is to certify that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is a [Postgraduate Student/Senior Resident] in the Department of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. He/She is permitted to attend and present a [Podium/Poster] presentation at KAPICON 2025, which is scheduled to be held in Hubballi from 13th to 15th June 2025.

We confirm that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is a bona fide student/resident of our institution and is actively engaged in academic and research activities under our guidance. We have no objection to his/her participation in the conference.

[HOD’s Name]

Head of the Department

[College Name]

 [Signature & Seal]