



To,
Organizing Secretary
40 UPAOICON 2023
Department of ENT & Head, Neck Surgery
United Institute Of Medical Sciences, Prayagraj in association with MLN Medical
College, Prayagraj & AOI-Prayagraj branch

Subject: Bonafide Certificate from the HOD of the Department

Respected Sir/Ma'am

This is to certify that (name), is a Bonafide
Postgraduate student of the department of E.N.T.
.....Medical College

Thanking You,
Yours Sincerely

(Signature)

Name:
Designation:
Department:
College:
Date: