ANNEXURE - VI

No.

NO OBJECTION CERTIFICATE

This is to certify that I have no objection in Shri./Smt. ……..

…… (name, designation, office,Department) undergoing Diploma for Working Professionals in .....

at ……. (College Name) during the period 2026-28. I am aware that the class timings are in the evening hours / any flexible convenient timings, in alignment with the timings of Industry / Organisation and Board exams are conducted for each Semester during the time period 9.00 am to 5.00 p.m.

Place

Date

Signature of issuing authority

Name

Designation

(office seal)