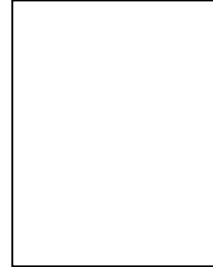




FORM



Name:-.....

Department:-

Roll No. **Email** **Mobile No.**

Theme

Signature of the student