

# CERTIFICATE OF PARTICIPATION

(To be Filled-in by the Chairperson of the Visiting Team)

This is to certify that the following Expert Volunteers have visited the Institution \_\_\_\_\_ (Name of the Institution) \_\_\_\_\_ on \_\_\_\_\_ (date) \_\_\_\_\_ for the NBA Accreditation visit as per details given below:

NAME OF THE EXPERTS	DISCIPLINE	DATE	ARRIVAL TIME	DEPARTURE TIME	USED NBA TRANSPORT YES/NO
<i>Add rows as needed</i>					

**Date:**

**(Name & Signature of the Chairperson of the Visiting Team)**