То		Date:
	The Director (IHTM), M.D. University, Rohtak.	
Subject:	<b>Submission of Training Report</b>	
Sir,		
	I am a student of MHMCT/MTTM/MHI	MCT 5 Yrs/BHMCT/BTTM under Roll
no Batch As per course curriculum I have completed my		
training/internship in (name of organization) from		
to		
herewith. I have also received appreciation certificate/award/prize/recognition during my		
training, details as attached.		
I hereby submit my training report & log book.		
I have verified thus, may please be accepted for submission. Yours Faithfully		
Mentor's Na	me	Name of Student
Signature		Signature
Faculty I/c T8	§P	Submission Allowed
		Director (IHTM)
For Office use only:		
No. of copies of Report received on, record placed in file.		

Office Asst.