

# Board Of Research In Fusion Science & Technology (BRFST)



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Project Number	
Date	
Name of the Project	

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(Name & address of Principal Investigator)

Signature

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(Name & address of Co- Investigator)

Signature

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(Name & address of Co-Investigator)

Signature

This is to certify that the necessary institutional facilities are available and will be provided for the implementation of the above mentioned project sanctioned under the National Fusion Program by the Board of Research in Fusion Science & Technology. We hereby agree to abide by all the terms and conditions of the BRFST indicated in the document (NFP:Doc:01:2007) "*Guidelines for Implementing Research Projects under the National Fusion Programme*"

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(Name and address of the Head of the Institution)

Signature with official seal of the Institute

Place :

Date :