

## **Consent form**

I, Dr/Prof.....hereby provide my consent to be a internal/external member of the advisory committee for the Ramalingaswami Re-entry Fellowship of Dr.....I will be happy to mentor the fellow and suggest course correction for his/her research work. I will also provide my opinion/views regarding the progress of the fellow to the Department of Biotechnology, New Delhi, whenever required.

**Signature and Seal**