

Resolution regarding Authorized Person

I/We,

i) **<Name>**Chairman / Secretary/ Member/ Trustee/ Director/ Proprietor**<Name of the Trust /Society/Company/ Institute>**, son of,
aged.....years and resident of

ii) **<Name>** Principal **<Name of the institute>**, son of.....
Aged..... years and resident of

Hereby declare that the Trust/ Society/ Company/ Institute vide its meeting held on
.....at vide item no.

Has resolved that “**Name of Authorized Person**”, will be the authorized person to sign
and communicate all the matters on behalf of **<Name of the institute>**

This is for your kind information and necessary action.

(Name of Chairman / Secretary/ Member/ Trustee/ Director/ Proprietor of Trust/ Society/
Company/ Institute)

Signature
(Designation)
(Name of the organization)

Accepted
Authorized Signatory
Signature
(Designation)
(Name of the ITI)