| To   |                         |
|--|-------------------------|
| Dr,  |                         |
| Head of the Department,  |                         |
| Department of,   |                         |
| College/Hospital   |                         |
| Subject: - Permission to present a Research Paper at OSMECON-2                                   | 2025.reg                |
| Sir/Madam,   |                         |
| We,(Name of the Delegate 1, Name of the D  | Delegate 2) studying    |
| in Semester in College/Hospital wor  | ald like to present the |
| Research Paper titled at OSMECON - 202   | 5 held at Osmania       |
| Medical College, Hyderabad. Our Research Paper is an original submission and                     | we have not             |
| committed any 'plagiarism' in preparing this Paper. We request you to grant us the permission to |                         |
| participate in the Paper Presentation session of OSMECON - 2025.                                 |                         |
| Thanking you,  |                         |
| Name of the Delegate 1,  TEAM OSMECON  Name of the Delegate 2.                                   | Yours sincerely,        |
|  |                         |

Date : Place:

(Attested by HOD)