

**A PROJECT REPORT**

**ON**

**Type Project Name**

**By**

**Type Student Name  
Type PRN**

**Type Specialization**

**Towards The Partial Fulfillment of the  
Master of Commerce**

**Tilak Maharashtra Vidyapeeth, Pune**

**2019 - 20**

# **CERTIFICATE**

This is to certify that the project

**Type Project Name**

Has been satisfactorily completed

**Type Student Name**

Towards The Partial Fulfillment of the '**Master of Commerce** ',

For the Academic Year [2019-2020] at

**Tilak Maharashtra Vidyapeeth, Pune**

**Project Guide**

**Examiner**

**Head of the Department**

# **ACKNOWLEDGEMENT**

Presenting herewith (**Type “Name of the project”**) (**Type Specialization**)  
Project report as part of the curriculum of ‘**Master of Commerce**’. I wish to thank  
all the government officials/ business and social leaders who extended me untiring  
support.

I express my profound thanks to our Head of the Department, Programme  
Co-ordinator, Teachers, Project Guide and Project Incharge and all those who have  
directly and indirectly guided and helped me in preparation of this project.

Name of the Student \_\_\_\_\_

PRN \_\_\_\_\_

Signature of Student \_\_\_\_\_

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## **Note:**

1. Student can decorate above three pages with borders with any line-style of their choice.
2. Every page except first 4 Title Pages will contain Header as Project Name (Center aligned) and footer will contain page no. (Center aligned)
3. Take One-side printout only.
4. Use font - Times New Roman  
Font Size for Headings -16, for General writing project -14

## **DECLARATION**

I, the undersigned, hereby declare that the Project Work entitled, **[Type Project Title]** **[Type Specialization]** submitted by me to the Tilak Maharashtra Vidyapeeth, Pune in partial fulfillment of the requirement for the award of the degree of Master of Commerce (M.Com.) is my original work and the conclusions drawn therein are based on my knowledge and the collected information from available data.

The Report submitted is my own work and has not been duplicated/copied from any other source.

Student Signature

[Type Student Name]

PRN. NO.:

Center Name:

Center Code:

Place:

Date: