**ENTRY FORM**

**INTERNATIONAL BIODIVERSITY DAY**

NAME OF THE PARTICIPANT:……………………………………………………………………………………………………..

AGE:……………………………………………………………………………………………………………………………………………

FATHER’S/HUSBAND’S NAME:…………………………………………………………………………………………………………..

SCHOOL/COLLEGE/INSTITUTION (If any):……………………………………………………………………………………..

…………………………………………………………………………………………………………………………………………………….

ADDRESS:…………………………………………………………………………………………………………………………………….

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TELEPHONE/MOBILE:………………………………………………………………………………………………………………….

E MAIL:…………………………………………………………………………………………………………………………………………

**CERTIFICATE:**

I,…………………………………………………………………………………….,S/O,D/O/W/O…………………………………………………, hereby, certify that the attached photograph/story is my original work/creation and there is no plagiarism. If there is a violation of copyright or other legal norms, the full responsibility will lie with me.

Signature of the participant