CENTRE OF EXCELLENCE FOR STRATEGIC BRAND IDENTITY DEVELOPMENT (CESBID)

**OFFICIAL USE ONLY**

**APPLICATION FORM FOR CESBID FINAL PROJECT REPORTS**

1. **Name of the Department:**

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1. **Name of the Faculty:**

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1. **Name of the Project and the project code:**

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1. **Project duration:**

**From: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **Specific project outcomes achieved:**
2. **Any deviations from the intended project plan:**
3. **Achievements/ publications reported on the project:**
4. **Measures proposed or taken to ensure the sustainability of the project outcomes:**
5. **Compilation of the feedback received from external stakeholders. Please enclose the documents as an Annexure.**