FIELDWORK REPORT

Submitted to the University of Mysore in partial fulfillment of the requirements for the award of degree in Master of Science in psychology

BY

HIBA MUHAMMED

REG NO: PC119064

GUIDE

Dr.SOMESHA.C

DEPARTMENT OF STUDIES IN PSYCHOLOGY

Manasagangotri

Mysore - 06

2021-2022

CERTIFICATE

This is to certify HIBA MUHAMMED, bearing register number PC 1190604 has satisfactorily completed the field work at the REVIVE HOLISTIC NEUROPSYCHIATRIC CARE AND REHABILITATION CENTER, MYSORE, in partial fulfillment of the requirements for the award of degree in Master of Science in psychology during the academic year 2020-2021.

Signature of Chiarmana N DOS in Psychology

Dr.G.VENKATESHKUMAR

MYSORE - 570 006

signature of

Dr.SOMESHA.C