

BONAFIDE CERTIFICATE

This is to certify that **Mr./Ms.** _____,
Son/Daughter of **Mr./Mrs.** _____,
is a **bonafide student/employee** of _____
(Institute/Organization Name).

He/She is studying/working in _____ (Class/Course/Department) during
the academic year _____.

As per our records, his/her date of birth is _____ and residential address is
_____.

This certificate is issued for the purpose of
_____.

Place: _____

Date: _____

Signature: _____

Name: _____

Designation: _____

Institute/Organization Seal: _____