

Date:- _____

To,
The Principal
D.A.V. Public School,
New Panvel.

SUBJECT : APPLICATION FOR BONAFIDE CERTIFICATE

Respected Sir / Madam,

I would like to apply for the Bonafide Certificate of my daughter / son Ms. / Mst.
_____ studying in class _____ Div. _____
in your school.

Kindly issue me the required certificate as marked on or before _____.

Thanking you,

Yours faithfully,

Phone No. _____

FOLLOWING DETAILS ARE FURNISHED HEREWITH FOR YOUR READY REFERENCE:

- (1) _____
 SURNAME STUDENT'S NAME FATHERS' NAME MOTHER'S NAME
- (2) **DATE OF ADMISSION :** _____
- (3) **ADMITTED IN CLASS :** _____
- (4) **DATE OF BIRTH :** _____
- (5) **PLACE OF BIRTH :** _____
- (6) **CASTE AND SUB CASTE :** _____
- (7) **REASON FOR BONAFIDE CERTIFICATE :** _____
