

DAFFODILS

INTERNATIONAL PUBLIC SCHOOL



APPLICATION FOR ISSUANCE OF

BONAFIDE STUDENT CERTIFICATE FEE CERTIFICATE

STUDENT'S PARTICULARS																																									
1. Name:	_____																																								
2. Class :	_____ Section : _____ Admission Number: _____																																								
3. Father's/Guardian's Name:	_____																																								
4. Address:	_____ _____ _____																																								
5. Phone :(R)	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> (O) <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																																								
6. Email ID :	_____																																								
APPLICATION DETAILS																																									
FOR AVAILING BONAFIDE STUDENT CERTIFICATE Please issue my child/ward mentioned above a certificate of him/her being a bonafide student of your school. This certificate is needed for the following purpose:																																									
FOR ISSUANCE OF FEE CERTIFICATE Please issue my child/ward mentioned above a certificate confirming that all his/her school fees for the current academic session have been paid till date. This certificate is needed for the following purpose:																																									

Date:

Place:

Signature of Parent