

Name : _____

Date : _____

Address : _____

Tel.No.: _____

To,
The Principal
Nirmala Memorial Foundation College of Comm & Sci.
Kandivali (East)
Mumbai 400 101

Sub : Application for Bonafide Certificate / No Objection Certificate

Respected Sir,

I, _____

undersigned studying in Class _____ Div. _____ Roll No. _____

Exam Seat No. _____ during the academic year _____, request

you to issue a Bonafide Certificate / No Objection Certificate for the following

purpose. _____

Thanking you,

Yours faithfully,

(Signature of the student)

**Note : 1) Photo Copy of previous Statement of Marks
2) Photo Copy of I-Card**