

DELHI PUBLIC SCHOOL



APPLICATION FOR BONAFIDE STUDENT CERTIFICATE

Date

STUDENT'S PARTICULARS

1. Name of the student : _____
2. Admission No. : _____
3. Grade : _____ Section: _____
4. Date of Birth : _____
5. Residential Address : _____
6. Telephone No. : _____
7. E-mail : _____
8. Father's Name/Legal Guardian's Name: _____
9. Mother's Name : _____

APPLICATION DETAILS

FOR AVAILING BONOFIDE 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:

Date _____

Place _____

Signature of Parent