

From:

Students Full Name: _____

Contact No. : _____

Date : _____

To:

The Principal

K. J. Somaiya Institute of Engineering &
Information Technology,
Sion, Mumbai-400 022

Sub. : **Application for Bonafide Certificate**

Registration No. : _____

Year : (FE/ SE/TE/ BE) : _____ **Academic Year :** _____

Branch : _____

Receipt No. _____ dated _____ (Rs.50/-)

Respected Sir,

I _____ student of this Institute *is /*
was studying in _____ for the A.Y _____ and I require the bonafide
certificate for _____ (specify reason)

Please issue me the bonafide Certificate.

Yours truly,

(_____)

Verified By,

(Students Section)

(A/c Section)