

PROFORMA FOR STUDY CERTIFICATE

Name, Full Postal Address & Telephone Number of the Institution

DATE: _____

This is to certify that _____ son/daughter of _____ has studied from
_____ standard to _____ standard in our institution from
_____ to _____ academic years.

The mother tongue of the candidate is _____ as per the Admission register
of the institution.

The above details are true to the best of my knowledge.



Signature of Head of the institution

{Name in Block letters _____ }

COUNTER SIGNED BY ME

Address, Seal and Office Telephone Number of the Block Educational Officer/DDPI