

2.

3.

## INSTITUTE OF HIGHER CATION AND RESEARCH

(Declared as Deemed-to-be University under section 3 of UGC Act, 1956)
(Vide Notification No. F.9-5/2000 - U.3, Ministry of Human Resource Development, Govt. of India, dated 4<sup>th</sup> July 2002)



SI No.

Phone: 044-22290742 / 22290125 . Telefax: 044-22293886 Website: www.bharathuniv.ac.in

173, Agaram Road, Selaiyur, Tambaram, Chennai - 600 073. Tamil Nadu.

## **BONAFIDE REQUEST FORM** [To be filled in CAPITAL letters]

From,	Date:
Name :	_
S/o or D/o :	_
Reg No :	_
Department:	Affix PP size
Year : Semester:	photograph
То,	
The Dean Academics BIHER	
Respected Sir,  Sub: Request f	r issue of Bonafide Certificate
l am	Reg No is studying
in [B.Tech/M.Tech/B.Arch/M.Arch/B.Sc/M	4/Ph.D], Branch
Year Semester I	equest you to kindly issue me Bonafide certificate for
the purpose of	
	nanking you.
	Yours faithfully,
	Mobile No:
Foi	Office Use Only
CAMU Status : [Active/Inactive]	
Attendance :%	
Mentor Name :	
Mentor Signature :	
Encl: 1. Copy of X <sup>th</sup> Mark Sheet.	

**School Dean** HoD

Copy of eAadhar Card [Clearly legible].

Copy of Fee receipt for Current Semester.