

GOLKONDA VIDYAPARISHAD

ANNEXURE-IV

An Independent Institution Established by Super Educational Trust
(Regd. By Govt. 212/2001), Andhra Pradesh, India.

[Fill in the form in BLOCK LETTERS]

Subject : Programme Certificate / Bonafide Certificate / Diploma Duplicate Mark sheet.

Sir,

I hereby request you to issue me Certificate/ Mark sheet.

The following are the information regarding the examination I have passed.

1. Name of the Student in (English)
2. Father's Name in (English)
3. Name of the Examination
4. Duration of the Course
5. Year of Passing
6. Roll Number
7. Enrollment Number
8. Name of Examination Centre from which passed
9. Reason for filling application

Your's Sincerely

Date Signature of Student

Address

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Application forwarded duly verified all the above particulars are found correct.