

Date : \_\_\_\_\_

The Deputy Registrar (Academic)  
I.I.T. Bombay  
Powai, Mumbai – 400 076

Subject : Application for Bonafide Certificate

Dear Sir,  
I, Mr./Miss. \_\_\_\_\_ (name in Hindi \_\_\_\_\_),  
Roll No. \_\_\_\_\_ studying in \_\_\_\_\_ year of \_\_\_\_\_ programme in  
\_\_\_\_\_ department request you to issue me Bonafide certificate for the purpose of  
\_\_\_\_\_.

Yours Sincerely,

(Signature of Student)

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For Office use only

Verified and found the details mentioned above O.K., please issue requisite certificate as per students application.

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Signature of Dealing Asst.