



OFFICE OF ACADEMIC AFFAIRS

F. No: IIITDM/Acad/

Date:

REQUEST FOR ISSUANCE OF BONAFIDE CERTIFICATE/ NO OBJECTION
CERTIFICATE (For Special purpose)

1) Details of the student:

Name of the Student		Roll No.	
Programme	B.Tech./ M.Tech./ M.Des./Ph.D.	CGPA	
Mobile No.			

2) Request : Bonafide Certificate / No Objection Certificate

3) Purpose : Internship / Visiting a Research Laboratory / University / Organization /
Participating in a Conference / Workshop / School

4) Duration : From _____ to _____.

5) Details of the Event:

(Name, Host, Venue and Relevance)

I undertake that the above event is relevance to my project / research work and I am aware of the rules concerning on duty.

Date:

Signature of the Student

Recommendation of the

FA/ Ph.D. Adviser

HOD

Dean (SRICCE)
For PhD - Project Scholars

Office use (Academics Section)

The documents are in order and the student may be issued Bonafide Certificate / No Objection Certificate

AR/JR (Academics)

Dean (Academics)