

**VNS GROUP OF INSTITUTIONS, BHOPAL**

(Application for issuing Bonafide Certificate / Fee Structure)

*To be filled in CAPITAL LETTERS only*

**INSTITUTE: Faculty of Engineering / Faculty of Pharmacy / Faculty of Management**

**Name of Student:**

**Father's Name:**

**Branch:**

**Enrollment No.:**

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**Regular in Semester:** 1/ 2/ 3/ 4/ 5/ 6/ 7/ 8 (please tick ✓)

**Purpose:**

I solemnly declare that above information is true to best of my knowledge.

**Date:**

**(Name & Signature of Student)**

**Account Section**

Fee Status: Paid / Unpaid Rs.

(Signature )

**Office**

Issued Bonafide on date \_\_\_\_\_ with reference no. \_\_\_\_\_

Issued Fee Structure on date \_\_\_\_\_ with reference no. \_\_\_\_\_

(Prepared by Signature)

(Checked by Signature)

**Associate Director**

Issue Bonafide / Fee Structure.

(Signature )