CERTIFICATE No. VII

BONAFIDE CERTIFICATE

[Ref.: Tamil Nadu Admission to Undergraduate Courses on preferential basis to students of Government Schools Act, 2021 (Tamil Nadu Act No.14 of 2021).]

This is to	certify that	Selvan/Selvi	
S/o/D/o			residing at
has studied from _		Standard to	Standard from the academic
year	to	in the _	
			(Name
and address of Gov	ernment scho	ool).	

SI. No.	Class	Year of Study	Name of the Government School	Type of School (Government Corporation School/Municipal School/Adi Dravidar and Tribal Welfare School/Kallar Reclamation School/Forest Department School/Other Schools Managed by Government Departments

2	XI		
3	X		
4	IX		
5	VIII		
6	VII		

I declare that the above information furnished by me is true.

Signature of the Candidate

Verified the above information in respect of the school last studied with the records and found correct.

Seal and Signature of the Headmaster / Headmistress Name :

Verified with report obtained from the Head Master / Head Mistress of all the above mentioned Schools and found them to be correct.

Seal and Signature of the Chief Educational Officer. Name :

APPLICATION FORMAT

Name of the Girl Student	
2. Date Of Birth	
3. Aadhar number	
Father name / 4. Mother's Name / Guardian Name	-
5. Community : BC MBC SC ST OBC Others	
6. EMIS number :	
7. School Name :	
8. District / Place :	
9. Class studied 6^{th} 7^{th} 8^{th} 9^{th} 10^{th} 11^{th} 12^{th}	
10 School Studied : Government Private School under RTE	
Solver of Coddition	
11. Year of Passing 10 th :	
Year of Passing 10 th	
11. Year of Passing 10 th : The state of Passing 12 th : The sta	
11. Year of Passing 10 th :	Property of the Parket of the
11. Year of Passing 10 th :	The section of the se
11. Year of Passing 10 th :	Landania .

18	Branch / Subject	:	
19	Duration of the course	ì	3 year Syear
20	. Address		
		:	
			PIN
21.	Contact Number	î	
22.	Whether receiving any other scholarship	:	Yes
23.	If yes, name of the scholarship	:	
24.	Bank Details		
	Account Holder	ř	
	Account No.	÷	
	Name of the Bank	÷	
	Branch Name	**	
	IFSC Code	ť	
	All details have been	V	erified and found correct.
			Signature of the Applicant
			the applicant (Name) of
	(Course	e)	(Year) is student of our institution.
			7

Signature of the Head of the Institution

CERTIFICATE No. VII

BONAFIDE CERTIFICATE

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year	to		in the	
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and address of Go	vernmen	t school).		

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2	XI			
3	Х			
4	IX			
5	VIII			
6	VII			
7	VI			

I declare that the above information furnished by me is true.

Signature of the Candidate

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Seal and Signature of the Headmaster / Headmistress Name :

Verified with report obtained from the Head Master / Head Mistress of all the above mentioned Schools and found them to be correct.

Seal and Signature of the Chief Educational Officer. Name: