	Date:/
То	
Training & Placement Cell	
Bhilai Institute of Technology, Ra	aipur.
SUBIECT: - Application towards	s issuing of the bonafide certificate
Respected Sir,	
I,	student of semester in
branch would he	ereby like to request you to kindly issue the bonafide certificate to
pursue my vocational training/in	nternship in favor of :-
Name of the HRM/DGM/GM	
Name of the Organization	
Designation	
Contact	
Email ID	
	Student's Signature
Name of the Dept. T & P In-Charg	ge :
Signature	
UN	NDERTAKING/DECLARATION FORM
Ι	student of semester in branch,
hereby declare that I will be ab	iding with all the norms of organization during my training period
from/ to/_	
responsible for whatever act aris	ses during my training period.
Student's Signature	Parent's Signature
	FOR OFFICIAL USE
Date of Issue of bonafide certific	cate :
Reference Number	: