



Department of Computer Science and Engineering

KARUNYA INSTITUTE OF TECHNOLOGY AND SCIENCES

(Declared as Deemed to be University)

Karunya Nagar, Coimbatore – 641 114, Ph:0422 2614371,78

BONAFIDE REQUEST FORM

(To be filled-in by student & submitted to the mentor for any requirements from office)

(Tick whichever is applicable)

- BONAFIDE CERTIFICATE PROJECT (FULL/HALF) IN-PLANT TRAINING
 INTERNSHIP IAESTE

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Name : _____ **Father Name :** _____

Reg. No. : _____ **Year:** _____ **Branch:** _____ **DOB:** _____

Mobile No. _____ **Name of the Mentor :** _____

Purpose for which the Certificate is required: _____

(Bona fide /In-plant Training /Internship/IAESTE /Project (Full /Half)

No.of Days: _____ **From** _____ **To** _____

Date : _____ **Signature of the Student**

(To be filled-in by the Mentor and submitted to Department Office)

a) **Class Attendance Semester Wise:**

1 st sem.	2 nd sem.	3 rd sem.	4 th sem.	5 th sem.	6 th sem.	7 th sem.	8 th sem.

b) **Overall CGPA :** _____ **/ Arrears :** _____

c) **Dress Code :** _____ **/ Character & Conduct :** _____

d) **Remarks / Recommendation of Mentor :** _____

Signature of Mentor _____

Signature of HOD _____

If required In-plant Training /Project (Full Address) :

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Signature of IPC

Received Certificate:.....

