

Application for Bonafide Certificate for Internship/Apprenticeship

Name of Applicant:

Date: __/__/20

Roll No.

To,
Office of,
Head of Department
University of XXX
Address:

Sub: Application in Request of Bonafide Certificate for Internship/Apprenticeship

Sir/Ma'am,

I am (your name) _____ and I have been a student at your institution since _____ (number of years you have been studying at the institution) in _____ (specify your course). I have been selected for an internship/apprenticeship programme at _____ starting from _____ and ending on _____.

Kindly request you to issue me a bonafide certificate in favour of my internship.

Sincerely,

_____(Signature)

_____(Name of Applicant)

_____(Relevant Details, as applicable)