

SCHOOL OF OPEN LEARNING
(CAMPUS OF OPEN LEARNING)
UNIVERSITY OF DELHI, DELHI-110007

ANNEXURE

_____ **SCHOOL/COLLEGE.**
(Name and location of the Institution)

Certified that Sh./Miss _____ Son/Daughter of
Mr./Mrs. _____ is a student of _____.
He/She is not in receipt of Scholarships of Rs. _____ per month from _____
_____. He/She has paid tuition fee @ Rs. _____ P.M. for the
period from _____ to _____ as per details given below:-

1.	Tuition Fees	@	Rs. _____	Per Month
2.	Science Fees	@	Rs. _____	Per Month
3.	Work Exp.	@	Rs. _____	Per Month
4.	_____	@	Rs. _____	Per Month
5.	_____	@	Rs. _____	Per Month
TOTAL			_____	

It is also certified that _____ School/
College is recognized by the Educational Authorities of _____
_____ State (not applicable for Government Schools and Schools run
by Municipal Corporation Committee).
(Date from which continuously studying in the same class).

Dated: _____

PRINCIPAL/HEAD-MASTER/HEAD MISTRESS