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