**KIDS KINGDOM CONVENT SCHOOL SINGHEWALA**

1. Name ..................................................................................................................

2. Class ...................Section ...............Registration Number .............................

3. Father’s / Guardian’s Name .................... .......................................................

4. Address ............... ................................... ........................................................

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5. Phone (M) ............. ....................(R) ..............................(O) .............................

6. Email ID .. .........................................................................................................

**STUDENT'S PARTICULARS**

**APPLICATION DETAILS**

# FOR AVAILING BONA FIDE STUDENT CERTIFICATE

Please issue my child/ward mentioned above a certificate of him/her being a bona fide student of your school. This certificate is needed for the following purpose:

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Date ...............................

Place ...............................



Signature of Parent