



CHIKKANNA GOVERNMENT ARTS COLLEGE

Tirupur- 641 602

**BONAFIDE CERTIFICATE**

**Date :**

*This is to certify that Selvan / Selvi.....*

*S/o / D/o .....DOB.....studying*

*..... in this college during the academic year.....*

*His / Her Conduct and Character is .....*

*Tutor / HOD*

**College Seal**

*Principal*



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