

GOVERNMENT OF ODISHA
OFFICE OF THE ZILLA SAINIK BOARD,

BONAFIDE CERTIFICATE

Certified that

No_____Rank_____Name_____Resident of

Village_____Post_____

District_____ (**Odisha**) is a bonafide Ex-serviceman of the Indian Army/Navy/Air Force. He had served in the Indian Army / Navy / Air Force From_____to_____. He has been issued with Ex-serviceman Identity Card bearing Machine No ODI-0_____.

Shri/Kumari_____ is the dependent son/daughter of the above named Ex-serviceman. He/She is eligible for admission in _____ course (mention name of course) in the seats reserved for the children of Ex-serviceman.

Place :

Secretary
Zilla Sainik Board,

Dated :

To

The Secretary,
Zilla Sainik Board,

APPLICATION FOR ISSUE OF BONAFIDE CERTIFICATE

Sir,

I, _____ Service No _____

Rank _____ request that a Bonafide Certificate for my son / daughter

Shri/Kumari _____ whose date of birth is _____

may kindly be issued for the following purpose.:-

- (a) For admission in professional Course
(Specify the name of course such as _____
BE, B.Tech, MCA, MBA, Diploma Engg
Medical (MBBS/BDS/BHMS/BAMS), CT & B.Ed etc)
- (b) For admission in +2/+3 level courses, ITI etc (Specify name of
Course) _____

I am submitting herewith copies of the following documents for verification:-

- (a) Ex-serviceman/widow Identity Card issued by Zilla Sainik Board in Odisha.
- (b) Complete Discharge Book/Service Particulars. (Name and date of birth of
Son/Daughter must be recorded and tallied with academic certificate).
- (c) Matriculation Certificate for verification of date of birth.
- (d) Rank Card/Certificate of last qualifying examination.

Yours faithfully,

Signature of the applicant

Name _____

Present address _____

Mobile No _____

Dated :