

IT COMPUTER EDUCATION INSTITUTE OF TECHNOLOGY

Registered With: Under The Society & Public Trust Act.21,1860 I Ministry Of MSME
[A National Programme Of It Education & Computer Literacy]





Certificate SR No		Student ver	incation For		ollment No.		
Study Centre							
Course	Duration Session						
Candidate Information Please Fill in English BLOCK LETTERS							
Name of Student							
Father's Name							
Mother's Name							
Address							
	Dist State - Pin code-						
Gender: Male	Female	Female DOB Mobile No.					
Phone No.	E-mail ID						
Diploma/Certificate Details							
Serial No.	Enrollment No.	Course Name	Obtained Marks	Duration	Session	Issue Date	
Respected Sir/Maidam							
This is the Letter for My Diploma / Certificate Verification, so you are							
Requested To Verify My Details And Revert It As Soon As Possible.							
Thank you							
Date							
Place				Si	gnature		
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