

Certificate

1. It is certified that _____ number of students are visiting the Science City, Kapurthala on
_(date)_____ from _(name of school)_____, Village /
Town_____, Tehsil_____, District_____.
2. They are accompanied with _____ number of teachers.
3. Name of the Teacher In-charge: _____ who is authorized to sign on
the behalf of School.
4. The distance between the school and Science City, Kapurthala is _____ Kms.
5. Bank Details:
Bank Name:
Bank Account No.:
RTGS Code:

Signature

Principal / Headmaster

(Stamp / Seal)

Note: Teacher in the ratio of 1:25 students will be complimentary and considered for reimbursement purpose. If number of students is less than 25 only one teacher will be complimentary and considered for reimbursement purpose.