

Letter No: SU/RO/2023-24/

Date :

TO WHOME SO EVER IT MAY CONCERNED

This is to certify that Mr./Ms. _____ S/D/o
Shri. _____ is a bonafide student of
(course) _____ Year I / II / III / IV session 2023-24 in
Sanskriti University. As per our office record, his / her credentials are follows.

Aadhar No

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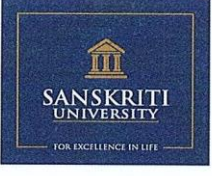
Permanent Address:

Correspondence Address:

**Sanskriti University Campus
Chhata, Mathura, UP-281401**

This certificate is being issued on his/her request for personal use only.

Authorized Signatory



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Permanent Address:

Correspondence Address:

**Sanskriti University Hostel
NH-19, Chhata, Mathura, UP-281401**

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Authorized Signatory