To, Dated:

The Director/CO NBVTE NATIONAL BOARD OF VOCATIONAL TRAINING EDUCATION New Delhi – 110042

New Deilii – 110042
SUB: Student Verification Letter Dear Sir, Please verify the record of the student given below.
Applicant Name
Father's Name
Enrollment No
Institute Name
Contact NoMail Id
Reason of Verification
Dated
with the request to please send student verification details via mail/postal
Thanking you,
Yours Faithfully

Dated: