

P. G. ACADEMY'S

P.G. INTERNATIONAL SCHOOL

Daund, Dist. Pune

05

BONAFIDE CERTIFICATE

Geo. Reg. No. 0835

Date : 20/05/2023

This is to certify that Master/Miss ANAM ALAMU DOLIN SHAIKH
is / was a bonafide student of this school studying in Std. V: C4 Div. A in the
year 2022-2023. His/Her date & place of birth as recorded in this school register is (in figures)
15/01/2017 (in words) Fifteen January Two Thousand and Seventeen

— Birth place Daund . He/She belongs to —

Religion, & MYSLIM Sub caste of — Category.

To the best of my knowledge he / she bears a good moral character.

Date : 20/05/2023

F. Pather
Clerk



फॉर्म 1
NO. 1



महाराष्ट्र शासन
GOVERNMENT OF MAHARASHTRA
स्वास्थ्य विभाग DEPARTMENT OF HEALTH

MUNICIPALITY DAUND

जन्म प्रमाणपत्र
BIRTH CERTIFICATE

फॉर्म-5
FORM-5



जन्म व मृत्यु नोंदणी अधिनियम, 1969 च्या कलम 12/13 अन्वि महाराष्ट्र जन्म आणि मृत्यु नोंदणी नियम, 2000 से नियम 8/13 अन्वये देण्यात आले आहे.
(ISSUED UNDER SECTION 12/13 OF THE REGISTRATION OF BIRTHS & DEATHS ACT, 1969 AND RULE 8/13 OF THE MAHARASHTRA REGISTRATION OF BIRTHS & DEATHS RULES 2000)

प्रमाणित करण्यात येत आहे की, माहिती नोंदणी जन्माच्या मूळ अभिलेखाच्या नोंदणीतून देण्यात आली आहे, जी की नगर परिषद बॉर्ड, मायुका बॉर्ड, विन्हा पुणे
महाराष्ट्र राज्या, भारत च्या नोंदणीत उल्लेख आहे.
THIS IS TO CERTIFY THAT THE FOLLOWING INFORMATION HAS BEEN TAKEN FROM THE ORIGINAL RECORD OF BIRTH WHICH IS THE REGISTER FOR
MUNICIPALITY DAUND OF TAHSIL/BLOCK DAUND OF DISTRICT PUNE OF STATE/UNION TERRITORY MAHARASHTRA, INDIA.

नाव / NAME: ANAM / अनाम

लिंग / SEX: महिला / FEMALE

जन्म तारीख / DATE OF BIRTH:
15-01-2017
FIFTEENTH JANUARY-TWO THOUSAND SEVENTEEN

जन्म ठिकाण / PLACE OF BIRTH:
SATHI HOSPITAL/---

आईचे पूर्ण नाव / NAME OF MOTHER:
NAHL ALIMUDDIN SHAKH / राहीन अलिमुद्दीन शेख

वडिलांचे पूर्ण नाव / NAME OF FATHER:
ALIMUDDIN SHAHABUDDIN SHAKH / अलिमुद्दीन शाहाबुद्दीन शेख

आईचे आधार कार्ड क्रमांक / MOTHER'S UID NO:
3304 9922 2982

वडिलांचे आधार कार्ड क्रमांक / FATHER'S UID NO:
6443 6784 2629

बाळाच्या जन्माच्यावेळी आई-वडिलांचा पत्ता / ADDRESS OF PARENTS AT THE TIME OF BIRTH OF THE CHILD:

आई-वडिलांचा वायमया पत्ता / PERMANENT ADDRESS OF PARENTS:

SANGAVI SANDAS, HAVELI, PUNE,
MAHARASHTRA

SANGAVI SANDAS, HAVELI, PUNE,
MAHARASHTRA

संगवी सदास, हवेली, पुणे,
महाराष्ट्र

संगवी सदास, हवेली, पुणे,
महाराष्ट्र

नोंदणी क्रमांक / REGISTRATION NUMBER:
B-2017: 27-90177-000137

नोंदणी दिनांक / DATE OF REGISTRATION:
24-01-2017

टीपा / REMARKS (IF ANY):

प्रमाणपत्र दिव्याचा दिनांक / DATE OF ISSUE:
04-07-2017

निर्गमित करणारे प्राधिकारी / ISSUING AUTHORITY:

रजिस्ट्रार (जन्म व मृत्यु)
REGISTRAR (BIRTH & DEATH)
MUNICIPALITY DAUND

UPDATED ON:
04-07-2017 12:49:43



"THIS IS A COMPUTER GENERATED CERTIFICATE WHICH CONTAINS FACSIMILE SIGNATURE OF THE ISSUING AUTHORITY"
* THE GOVT. OF INDIA VIDE CIRCULAR NO. 1/12/2014-VS(CRS) DATED 27-JULY-2015 HAS
APPROVED THIS CERTIFICATE AS A VALID LEGAL DOCUMENT FOR ALL OFFICIAL PURPOSES".

* प्रत्येक जन्म आणि मृत्युची घटना नोंदण्याची खात्री करा * / ENSURE REGISTRATION OF EVERY BIRTH AND DEATH*

