## RAK College of Pharmaceutical Sciences



## كلية العلوم الصيدلانية

## STUDENT'S REQUISITION FOR BONAFIDE CERTIFICATE

Date://20	
То	
The DEAN-RAKCOPS	
Dear Sir,	
I Mr. / Ms	, National,
holding passport no regist	tered in the academic year <u>20</u> , hereby
kindly request you issue me a bonafide certificat	e in Arabic/ English for
[mention the purpose]	
Signature of student	
	Mobile No.:
	0   5
FOR OFFICE USE Senior Administrative Assistant, RAKCOPS to process the request.	
Senior Administrative Assistant, RARCOPS to pro	cess the request.
	DEAN
	RAKCOPS