

Dr. KALAIIGNAR GOVERNMENT ARTS COLLEGE,

(SATTAMANDRA PONVIZHA)

KULITHALAI - 639 120.

DATE :

COURSE COMPLETION CERTIFICATE

This is to certify that

Son of / Daughter of.....

Date of birth..... has been completed his / her

..... in this college during the academic year.

His / Her Conduct / Character are

PRINCIPAL