

INSTITUTE OF BUSINESS ADMINISTRATION  
KARACHI

BONAFIDE – COMPLETION LETTER

NAME: \_\_\_\_\_ ERP ID: \_\_\_\_\_

PROGRAM: \_\_\_\_\_ CAMPUS: \_\_\_\_\_

PURPOSE: \_\_\_\_\_

ADMISSION YEAR: \_\_\_\_\_ PASSING YEAR: \_\_\_\_\_

DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

CELL #: \_\_\_\_\_ email: \_\_\_\_\_

\_\_\_\_\_  
FINANCE DEPARTMENT CLEARANCE: