

Authorization Letter

To,

Support

APLL

Bangalore, Karnataka

Sub - Authorization of Course _____

Respected Sir/Madam,

With due respect I would like to submit that it won't be possible for me to do the _____ course myself for the reason mentioned below.

Reason:

Therefore, I request you to allow the bearer of this letter Mr/Miss _____

_____ Residing at _____

I do also understand that I am reliving the company from any associates obligation whatever and I can't take any further claim.

Signature of the student _____

Thanking You,

Yours truly,

Original Purchaser Name: _____ Tid: _____

Phone No : _____

Address :

Signature : _____

Enclosed: ID proof of Original Purchaser of Product