



Date:

To,
The Centre administrator,
IDP Education Nepal Pvt. Ltd.,
Metro Park Mall, Ground Floor,
Uttar Dhoka, Lazimpat,
Kathmandu, Nepal.

Re: Authorization to collect TRF on my behalf.

Respected Sir/Madame,

I would like to authorize Mr./Ms,

Holding (Citizenship/Passport/Driving License) with number to
collect my TRF on my behalf. He/She will present the original of his above-mentioned ID as well as a copy
of my passport to you.

Regards,

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(Signature)

Name:

Passport Number:

Test date: