

GOVT.

5734/DEO(U.T.)—Govt. Press, U.T., Chd.

SCHOOL

SECTOR ____, CHANDIGARH

(Affiliated to the Central Board of Secondary Education, Delhi)

TRANSFER CERTIFICATE

Affiliation No. _____

School Code _____

Book No. _____ Sl. No. _____ Admission No. _____

1 Name of the Pupil _____

2A Father's/Guardian's Name _____

2B Mother's Name _____

3 Nationality _____ Religion _____

4 Whether the candidate belongs to Scheduled Caste/Scheduled Tribe/OBC _____

5 Date of first admission in this School with class _____

6 Date of birth according to Admission Register (in figures) _____
(in words) _____

7 Class in which the pupil last studied (in figures) _____ (in words) _____

8 School/Board Annual examination last taken, with result _____

9 Whether Detained, if so once/twice in the same class _____

10 Subjects Studied : 1. _____ 2. _____ 3. _____
4. _____ 5. _____ 6. _____ 7. _____

11 Whether qualified for promotion to the higher class _____
if so, to which class (in figures) _____ (in words) _____

12 Month up to which the pupil has paid school dues _____

13 Any fee concession availed, if so, the nature of such concession _____

14 Total No. of Attendance _____

15 Total No. of Attendance Present _____

16 Whether NCC Cadet/Girl Guide/Scout/NSS Volunteer Etc. (details may be given) _____

17 Games played or extra-curricular activities in which the pupil usually took part
(mention achievement level therein) _____

18 General Conduct _____

19 Date of application for certificate _____

20 Date of issue of certificate _____

21 Date of leaving the School _____

22 Reason for leaving the School _____

23 Any other remarks _____

(Principal)
Seal

Checked by
(Class Teacher)

Prepared by