

## **APPLICATION FOR TRANSFER CERTIFICATE**

(Preparation of TC shall take at least 3 working days)

wish to inform you that I shall be withdrawing my child.	The Principal	امانطم بيمير مستريب والمناب			
Reason for withdrawal:   Please arrange to issue the refund cheque in the name of father/mother			Class	Adm No :	
Please arrange to issue the refund cheque in the name of father/mother   will clear all the dues if any.  Category: GEN/SC/ST/OBC (Enclose document/proof) Date:			_ Class	Auiii. No	
I will clear all the dues if any.  Category: GEN/SC/ST/OBC (Enclose document/proof) Date:			ther/mother		
Signature of Parent   Signature of Principal	_	erreque in the name of la	<u></u>		
Signature of Parent    For Office Use Only	Category: GEN/SC/ST/OBC (En	close document/proof	<u>.</u> )		
Date of Birth:	Date :				
Date of Birth:	Signature of Parent			Signatu	re of Principal
Father's Name:		For Offi	ce Use Only		
Admission Date:   Admitted to Class:   Total Number of working days present   Total Number   Total Number	Date of Birth:			_	
Admission Date:   Admitted to Class:   Total Number of working days present   Total Number   Total Number	Father's Name:		Mother's N	ame:	
Total Number of working days Total Number of working days present					
Dues: AMOUNT (IN Rs.) INCHARGE INITIALS  Dr. Cr.  Library (Student ID Card)					
Dr.   Cr.				3 ,	
Library (Student ID Card) Laboratory Fees Others Security Deposits Net Amount Payable/ Receivable  I here by declare that all above information is correct. Please hand over the TC to the concerned parent. (PR Card	DUES:				NITIALS
Library (Student ID Card) Laboratory Fees Others Security Deposits Net Amount Payable/ Receivable  I here by declare that all above information is correct. Please hand over the TC to the concerned parent. (PR Card		Dr.	Cr.		
Fees Others Security Deposits Net Amount Payable/ Receivable PRINCIPAL  I here by declare that all above information is correct. Please hand over the TC to the concerned parent.  I here by declare that all above information is correct. Please hand over the TC to the concerned parent.  I here by declare that all above information is correct. Please hand over the TC to the concerned parent.  PRINCIPAL  ACCOUNTS DEPARTMENT: -  Refund Cheque No. Date Amount Date Sign:  Date of TC acknowledge by the Parents  TRANSPORT DEPARTMENT: -  Transport Incharge (for route updation) Date: Sign: Si					<del></del> -
Others Security Deposits Net Amount Payable/ Receivable  I here by declare that all above information is correct. Please hand over the TC to the concerned parent.  (PR Card	Laboratory				<del></del> -
Security Deposits Net Amount Payable/ Receivable  I here by declare that all above information is correct. Please hand over the TC to the concerned parent.  (PR Card					
Net Amount Payable/ Receivable					
I here by declare that all above information is correct. Please hand over the TC to the concerned parent.    PRINCIPAL					
PRINCIPAL  ACCOUNTS DEPARTMENT: -  Refund Cheque No.	Net Amount Payable/ Receivable				
ACCOUNTS DEPARTMENT: - Refund Cheque No.				the concerned parent.	
Refund Cheque No Date Amount					PRINCIPAL
TC Serial Number Date					
TRANSPORT DEPARTMENT: - Transport Incharge (for route updation)  PRONT OFFICE: - School app updation TC Upload on School Website Date: MS TEAM updation SR REGISTER SERIAL NO.  CLASS TEACHER: - Attendance Register Updation BACK OFFICE: -		Date	Am	ount	_
TRANSPORT DEPARTMENT: - Transport Incharge (for route updation)  PRONT OFFICE: - School app updation TC Upload on School Website Date: MS TEAM updation SR REGISTER SERIAL NO.  CLASS TEACHER: - Attendance Register Updation BACK OFFICE: -			Date		
Transport Incharge (for route updation)  Date:	Date of TC acknowledge by the Par	ents			
(for route updation)  Date:					
FRONT OFFICE: -  School app updation		_			
School app updation	(for route updation)	Date:		Sign:	
TC Upload on School Website Date: Sign: Si	FRONT OFFICE: -				
MS TEAM updation Date: Sign: S	School app updation	Date:		Sign:	
MS TEAM updation Date: Sign: Sig		Date:		Sign:	
CLASS TEACHER: -  Attendance Register Updation Date: Sign:  BACK OFFICE: -	•	Date:		Sign:	
Attendance Register Updation Date: Sign:  BACK OFFICE: -	SR REGISTER SERIAL NO.				
Attendance Register Updation Date: Sign:  BACK OFFICE: -	CLASS TEACHER: -				
BACK OFFICE: -		Date:		Sign:	
	= -			<u> </u>	
	· ·	Date:		Sign:	