

Signature of Class Teacher

BHARTIYA VIDYA MANDIR

(7) 2301523

SENIOR SECONDARY SCHOOL KITCHLU NAGAR, LUDHIANA.

Affiliated to Central Board of Secondary Education, New Delhi

Affiliation No. 1630230 School Code 20225

TRANSFER CERTIFICATE

Admission No. 6058/9

| | k No. 16 |
|-----|---|
| 300 | |
| 1. | Name of the Pupil KRISH KARWAL (in capital letters) Mother's Name ARS. VANDANA KARWAL (in capital letters) |
| 3. | Father's / Guardian's Name MR. DEEPAK WARMAL |
| 4. | Date Of Birth (in Christian Era) According to Admission and Withdrawal Register |
| | (in Figures) 02.11.2006 (in Words) SECOND NOVEMBER TWO THOUSAND SIX |
| 5. | Proof for D.O.B. submitted at the time of admission D.D.B. CERTIFICATE BY CORPORATION |
| 6. | Nationality INDIAN |
| 7. | Whether the candidate belongs to Schedule Caste or Schedule Tribe or OBC |
| 8. | Date of first admission In the school with class 01.04. 2009 PRE NURSERY |
| 9. | Class In which the Pupil last studied (in Figures)(in Words) |
| | School / Board Annual Examination last taken with result PASS |
| 11. | Whether failed, If so once / twice In the same class |
| 2. | Subjects studied: 1. ENGLISH 2. ECONOMICS3. ACCOUNTANCY4. PHY. EDUCATION |
| | 5. D.STUDTES 6 7 8. |
| 3. | Whether qualified for promotion to the higher class |
| | If so, to which class (in Figures) (in Words) |
| 14. | Month Upto which the Pupil has paid school dues |
| | Any Fee Concession availed of : If so, nature of such concession |
| 6. | Total No. of Working Days In the Academic Session |
| | Total No. of Days Pupil remained present In the school |
| | Whether NCC Cadet / Boy Scout / Girl Guide (Detail may be given) |
| | Games Played or Extra Curricular Activities In which the pupil usually took part |
| | (achievement level therein) |
| 20. | Whether School is under Govt. / Minority / Independent Category INDEACHDENT COTEGORY |
| | General Conduct 600D |
| | Date of Application for Certificate 25.03.2023 |
| 23. | |
| 4. | |
| 25. | Reasons for Leaving the School ADMISSION IN ANOTHER SCHOOL |
| | Any other Remarks |
| | MOTHER'S NAME AND DATE OF BIRTH FURNISHED ABOVE IS CORRECT AS PER SCHOOL RECORD. |
| | De Chames |
| | Checked by Sign. of Projection Care |

(Full Name and Designation) On last the way