

DAV BR PUBLIC SCHOOL, BINA APPLICATION FOR TRANSFER CERTIFICATE

1. Name of Student (In Capit	tal letter)			
2. Class Sec	Roll	No	Admission No	
3. Reason for leaving school.				
4. Subject Studied 01		02	03	
04		05	06	
Full Signature of the Parent /Guardian			Date	
Note: - Refundable security issue of Transfer Certificate				
	NO D	<u>UES CERTIFI</u>	CATE	
A/c office	Library	/		
Phy. Lab Bio	o. Lab	Spc	ortOthe	r
RE	PORT O	F THE CLASS	S TEACHER	
No. of working days	No. of day	present	General Conduct	
Promoted to / Detained /studying in class			Participated in	Games /Extra
Co-curricular activities				
Full Name & Sign. of the Cla	ss Tr.	I/C ERP	I/C Website	I/C SMS
	FOR (OFFICE USE	ONLY	
T.C. No	Issued on			
PRINCIPAL				

RECIEPT OF TRANSFER CERTIFICATE

Full Name & Sign. of the TC receiver Date:Note: Parents / Guardians should attach photo copy of Marks Sheets / Progress Report Card