

WISDOM VIDHYASHRAM INTERNATIONAL SCHOOL

Cheyar, T.V.Malai District.

TRANSFER CERTIFICATE

Serial No:

Admission No:

1. (a) Name of the school :
- (b) Name of the Educational District :
- (c) Name of the Revenue District :
2. Name of the Pupil (in block letters) :
3. Name of the Father or Mother of the Pupil :
4. Nationality, Religion & Caste :
5. Community
Whether He/She belongs to
 - (a) Adi Dravidar (S.C) or (S.T) :
 - (b) Backward class :
 - (c) Most Backward class :
 - (d) Converted to Christianity from scheduled caste :
 - (e) Denotified communities :
 - (f) Other caste :
6. Sex :
7. Date of Birth as entered in the Admission Register :
(in figures and words) :
8. Date of admission and standard in which admitted :
(the year to be entered in words) :
9. Standard in which the pupil was studying at the :
Time of leaving (in words) :
10. Whether Qualified for Promotion :
11. Whether the Pupil has paid all the fees due to school :
12. Whether the pupil was in receipt of any scholarship :
(nature of the scholarship to be specified)
13. Whether the Pupil has undergone Medical Inspection :
During the last academic year? (First or Repeat to be specified)

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14. Date on which the pupil actually left the school :

15. The Pupil's Conduct and Character :

16. Date on which application for Transfer Certificate was :

made on behalf of the pupil by the Parent or Guardian

17. Date of issue of Transfer Certificate :

18. Course of study :

Name of the school	Academic Year (s)	Standard (s) Studied	First language	Medium of Instruction

20. Signature of the H.M. with date and school seal

Note:

1. Erasures and unauthenticated or fraudulent alterations in the certificate will lead to its cancellation.
2. Should be signed in ink by the Head of the institution, who will be held responsible for the correctness of the entries.

Declaration by the Parent or Guardian

I hereby declare that the particulars recorded against items 2 to 7 are correct and that no change will be demanded by me in future.

Signature of the Candidate

Signature of the Parent/Guardian