



TRANSFER CERTIFICATE

Nehru Nagar
Kalapatti Road
Coimbatore - 641 014
Tel: 75026 89000
Email: sugunapip@yahoo.com
Web: www.sugunepips.in

Sl. No:

Admission No:

1. Name of the Pupil
2. Mother's Name
3. Father's/Guardian's Name
4. Date of birth (Christian Era) according to Admission & Withdrawal Register (in figure and in words)
5. Nationality
6. Whether the candidate belongs to Scheduled Caste or Scheduled Tribe or OBC
7. Date of First admission in the School with class
8. Class in which the pupil last studied (in figures and in words)
9. School/Board Annual examination last taken with result
10. Whether failed, if so once/twice in same Class
11. Subjects studied
12. Whether qualified for promotion to higher class. If so, to which class (in fig.) (in words)
13. Month upto which the pupil has paid school dues
14. Any fee concession availed of: if so the nature of such concession
15. Total No. of working days / Days present
16. Whether NCC Cadet/Boy Scout/Girl Guide (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 / Date of issue for Certificate
20. Reason for leaving the School
21. EMIS No
22. Any other remarks

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Signature of Class Teacher

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Checked by
(with full name and designation).

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Signature of Principal with date
School SEAL