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KVM Public School

KVM COLLEGE ROAD, KOKKOTHAMANGALAM P.O CHERTHALA-688527

Email: kvmpublicschoolcherthala@gmail.com Phone No. 8547469477

TRANSFERCERTIFICATE

Во	ok No:	Admission No	:					
1. Name of Student								
2. Father's/ Guardian's Name								
3. Whether the candidate belongs to Schedule Caste or Schedule Tribe:								
4.	4. Date of first admission in the school with class:							
5. Date of Birth(In Christian Era)according to the Admission								
Register (in figures)								
6. Class in which the student studied (in figures): (in words)								
7.	7. School/Board Annual Examination last taken with result:							
8. '	8. Whether failed, If so once/twice in the same class							
9.	Subje	ctstudied1			2.	3.		
	4		5.	6	7.	8		
10.	O. Whether qualified for promotion to the higher class If so, to which class (in figures)(in words) Class							
11.	. Month up to which(student has paid)school dues paid:							
12.	2. Any fee concession availed of, if so, the nature of such concession:							
13.	3. Total No. of working days:							
14.	4. Total No. of working days present:							
15.	Whether NCC Cadet/Boy Scout/Girl Guide(details may be given)							
16.	6. Games played on extracurricular activities in which the pupil usually took part							
	(Mention achievement level therein)							
17.	Genera	al conduct		:				
18.	Date of application for certificate							
	. Date of issue of certificate:							
	Reason for leaving the school:							
21.	1. Any other remarks							

Signature of Class Teacher

Signature of Principal