

PIONEER CONVENT

Mahalaxmi Nagar, Opp. Bombay Hospital, Ring Road, INDORE Phone No.: 0731-2551098, 2570645, Email: pio.con@rediffmail.com

TRANSFER CERTIFICATE Date: 2 8 Affilition No. 1030162 School Code: 14013 Book No. SI.No. Addmission No. 1 Name of Pupil A NISHO 2. Mothers Name 3. Fathers / Guardians Name 4. Nationality Whether the Candidate belongs to Scheduled Caste or Scheduled Tribe 5. 6. Date of first admission in the school with class 31 07/17 Date of Birth (in Christian Era) according to Admission Register (in fitures) 7. (Inwords) 8. Class in which the pupil last studies (in figures) (in words) School/Board Annual Examination last taken with result 9. Whether failed if so once/twice in the same class 10. Subject Studied 1 Frolish 2 Physics 3 (11. Whether qualified for promotion to the higer class if so, to which class (in figures) _____ (inword) 13. Month up to which the (pupil has paid) school dues/paid Any fee concession availed of : so, the nature of such concession ______No 14. Total No. of working days 186 16. Total No. of working days present 162 15. 17., Whether NCC Cade/Boy Scout/Girl Guide (details may be given) _____ No Games played or extra-curricular activities in which the pupil usually took part (mention achievement level therein) 19. General Conduct Date of application for certificate 32 06 20. 1 21. Date of issue of certificate 22. REasons for leaving the school 23. Any other remarks Luchma

Signature of Class Teacher

Checked by (state full Name and Designation)

Principal SEAL