



ISABELLA DE ROSIS PUBLIC SCHOOL

THEVARKAD, VARAPUZHA P. O. – 683517

Affiliation No .931242

School Code :76219

Admission No.....

TRANSFER CERTIFICATE

1. Book No. :
2. Name of pupil :
3. Mother's Name :
4. Father's Name /Guardian's Name :
5. Nationality :
6. Proof for Date of Birth submitted :
- at the time of admission
7. Date of Birth (in figures) :
8. Date of Birth (in words) :
9. Whether the candidate belongs :
- to SC,ST,OBC,OEC or any other
10. Religion :
11. Date of first admission in the school with class :
12. Class in which the pupil last studied :
- (In figures and In words)
13. School/Board Annual Examination last :
- taken with result
14. Whether failed ,if so once /twice in :
- the same class
15. Subjects studied :
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- 16. Whether qualified for promotion to :
the higher class if so ,to which class
(in fig & in words)
- 17. Total No. of working days in the :
academic session
- 18. Total No. of presence in the :
academic session
- 19. Month up to which the (pupil has paid) :
school dues /paid
- 20. Any fee concession availed of :
if so ,the nature of such concession
- 21. Whether NCC Cadet /Boy Scout /Girl Guide :
(Details may be given)
- 22. Whether school is under :
Govt./ Minority/ Independent Category
- 23. Games played or extra –curricular activities :
in which the pupil usually took part
(mention achievement level there in)
- 24. General conduct :
- 25. Date of Application for certificate :
- 26. Date of issue of certificate :
- 27. Reasons for leaving the school :
- 28. Any other remarks :

Class Teacher

Checked By

Principal