



**VEL'S VIDHYALAYA**  
**AN EXCLUSIVE CBSE SCHOOL**

Velammal Square, Muthuramalingam Gardens, Saai City, Pasuvanthinai Road,  
Pandavarmangalam, Kovilpatti - 628502. Ph : +91-04632 231333 / 233777

Book No.

Sl.No.

Admission No.

**TRANSFER CERTIFICATE**

1. Name of the Pupil : .....
2. Mother's Name : .....
3. Father's / Guardian's Name : .....
4. Date of Birth (in Christian Era) According to Admission & Withdrawal Register (in figures) : ..... (in words).....
5. Nationality : .....
6. Whether the candidate belongs to Schedule Caste or Schedule Tribe or OBC : .....
7. Date of first admission in the School with Class : .....
8. Class in which the pupil last studied (in figures) : .....
9. School / Board Annual examination last taken with result : .....
10. Whether qualified for promotion to the higher class. If so, to which class (in fig) : .....
11. Month upto which the pupil has paid school dues : .....
12. Total No. of working days in the academic session : .....(in words) .....
13. Total No. of working days pupil present in the school : .....
14. Whether NCC Cadet / Boy Scout / Girl Guide (details may be given) : .....
15. General conduct : .....
16. Date of application for certificate : .....
17. Date of issue of certificate : .....
18. Reasons for leaving the school : .....
19. EMIS Number : .....
20. Aadhar Number : .....

Principal  
(With School Seal & Date)

**DECLARATION OF THE PARENT**

I hereby declare that the particulars recorded against items 1 to 4 are correct and that no change will be demanded by me in future.

Signature of the Parent / Guardian