



ओ३म्
D.A.V. PUBLIC SCHOOL

S.E.C.L. BHATGAON

DIST: SURAJPUR (C.G) - 497235

(Managed by D.A.V. College Managing Committee, Chitragupta Road, New Delhi)

(Affiliated to C.B.S.E. New Delhi, Vide Aff.No. 3330036)

E-Mail Id: davbhatgaon@gmail.com

Website: www.davbhatgaon.org

TRANSFER CERTIFICATE

SEMIS CODE: 220215022403

U-DISE CODE: 22271502421

School Code: 03492

TC. No 1849

Admission No 1523

1. Name of Pupil **KUMAR SANSKAR**
2. Mother's Name **SUNITA SINGH**
3. Father's / Guardian Name **BIRENDRA KUMAR**
4. Date of Birth (in Christian Era) according to Admission and Withdrawal Register
(in figures) **16-11-2003** (in words) **SIXTEENTH NOVEMBER TWO THOUSAND THREE**
5. Nationality **INDIAN**
6. Whether the candidate belongs to Scheduled Caste or Scheduled Tribe or OBC **GENERAL**
7. Date of the first admission in the School with class **Class : LKG** Dated **09-04-2007**
8. Class in which the pupil last studied (in figures) **Class : X** (in words) **TENTH**
9. School / Board Annual examination last taken with result **PASSED CLASS-X (AISSE) -2019**
10. Whether failed, if so once / twice in the same class **NO**
11. Subject Studied **ENGLISH, HINDI, MATHS, SCIENCE, S.ST**
12. Whether qualified for promotion to the higher class **YES**
- If so, to which class (in figures) **XI** (in words) **ELEVENTH**
13. Month upto which the pupil has paid school dues **MARCH 2019**
14. Any fee concession availed of. If so, the nature of such concessions **NO**
15. Total No. of working days in the academic session **205**
16. Total No. of working days pupil present in the school **166**
17. Whether NCC Cadet / boy Scout / Girl Guide (details may be given) **NO**
18. Games played / extra-curricular activities in which the pupil usually took part (mention achievement level there in) **NA**
19. General Conduct **GOOD**
20. Date of application for certificate **17.06.2019**
21. Date of issue of certificate **17.06.2019**
22. Reason for leaving the school **ON REQUEST OF PARENT**
23. Any other remarks **NO**

Signature of _____
Class Teacher

Checked by _____
(state full name and designation)

Signature of Principal with date _____
Principal