

GULF INDIAN SCHOOL

Appn. No:

TC No:

APPLICATION FOR TRANSFER CERTIFICATE

Parents should complete the 1st segment and submit the form to the school office.
TCs will be issued between 8:30am – 12:30pm only.

I. Name of the student :

Class & Section :

Admission No:

Reason for leaving :

Name of the school he / she
intends to join :

Student ID card returned :

Parent's signature & date :

II. To be filled by the Class Teacher:

Class & Section :

Main Subjects Studied : (i)..... (ii)..... (iii).....
(iv)..... (v)..... (vi).....

Total no. of days attended :

Last date attended :

Co-curricular activities :

Conduct :

Present Status :

Date: _____

Signature of the Class Teacher

III. Clearance from : Accounts Section Library Laboratory

Dues if any :

Signature of : Accountant Librarian Science Teachers

Date: _____

Principal's Signature