AIR FORCE SCHOOL, PATHANKOT

APPLICATION FOR ISSUE OF TC

Sl. No.

(PART- A)

(To be filled in by the Parents and handed over to Class Teacher at Least one week in advance.)

1. Name of the Pupils : _____ 2. Class & Section : _____

3. Father's Name _____ 4. Mother's Name _____

5. Nationality : _____ 6. Contact No. _____

7. Bank A/c No. : | | | | | | | | | | | | | | |

   IFS Code : | | | | | | | | | | | | | | |

   Bank Name : _____

8. Pupil's Date of Birth : _____ 9. Fees Paid upto : _____

10. Reasons for leaving the school : _____

(Note : Caution money receipt must be presented by the parents at the time of applying for T.C. towards refunds of security. In case of non-availability of receipt due to loss of misplacement, parents may submit an application addressed to the Executive Director for refund of their security deposit.)

Date :

(PART- B)

Signature of the Parents

1. Name of the Pupil : .....
2. Mother's Name : .....
3. Father's Name..... .....
4. Nationality.....
5. Whether the pupil belongs to SC/ST/OBC Category Yes/ No.....
6. Date of birth according to the Admission register : In figure).....(In Words).....
   .....
7. Class in which the pupil's last studied (In figures).....(In words).....
   .....
8. School/ board exam last taken with result : .....
9. Subject studied : 1.....2.....3.....
   4.....5.....6.....7.....
10. Whether qualified for promotion to the next higher class .....
11. Whether the pupil has paid all dues to vidyalaya.....
12. Month upto which the school dues have been paid.....
13. Any fee concession availed of : Yes/No.....
14. Total No. of working days during the academic session.....
15. Total no of working days during which the pupil was present.....
16. Whether NCC Cadet/Boy Scout/Girl Guide/Cub/Bulbul (give details).....
18. General Conduct.....
19. Date of issue of this Transfer Certificate.....
20. Reason for leaving the school.....
21. Any remarks by Health Wellness Teacher.....
22. Any other remarks.....

Date :

(Signature of Class Teacher)