

INDIAN SCHOOL SOHAR

P.O.Box: 846, Postal Code: 311, Sohar, Sultanate of Oman
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E-mail: office@indianschoolsohar.com
Website: www.indianschoolsohar.com
CBSE Affiliation No.: 6130006




TRANSFER CERTIFICATE

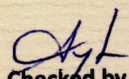
Affiliation No. 6130006
Sl.No. 1752


School Code. 90169
Admission No. 10560

1. Name of Pupil : ABHINAV AJAY
2. Mother's Name : SHEEBA AJAY
3. Father's / Guardian's Name : GEORGE AJAY
4. Date of Birth (in Christian Era) according to Admission and Withdrawal Register : (in figures): 25/12/2012
(in words): TWENTY FIVE DECEMBER TWO THOUSAND TWELVE
5. Nationality : INDIAN
6. Whether the candidate belongs to Schedule Caste or Schedule Tribe or OBC : -----
7. Date of first admission in the school with class : 03-01-2017 - LKG
8. Class in which the pupil last studied : (in figures) : IV (in words): FOURTH
9. School / Board Annual examination last taken with result : LEFT WHILE STUDYING IN CLASS IV
10. Whether failed, if so once / twice in the same class: : N/A
11. Subjects Studied : ENGLISH, EVS, HINDI, MATHEMATICS
12. Whether qualified for promotion to the higher class : -----
(in figures) ----- (in words) : -----
13. Month upto which the pupil has paid school dues : NOVEMBER-2022
14. Any fee concession availed of. If so, the nature of such concession : -----
15. Total No. of working days in the academic session : 121
16. Total No. of working days pupil present in the school : 83
17. Whether NCC Cadet / Boy Scout / Girl Guide (details may be given) : NA
18. Games played or extra curricular activities in which the pupil usually took part: : CERTIFICATES ISSUED TO THE CHILD FOR THE ACHIEVEMENTS
(mention achievement level therein)
19. General Conduct : GOOD
20. Date of application for certificate : 30/11/2022
21. Date of issue of certificate: : 04/12/2022
22. Reason for leaving the school : PARENT'S REQUEST
23. Any other remarks : NO

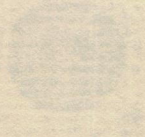



Signature of Class Teacher


Checked by
(with full name & designation)


Signature of Principal with date
School Seal

INRIAN SCHOOL BOULAR



DECLARATION

I hereby declare that the above is a true and correct copy of the original document.

Signature of the Officer

Date

Place

Signature of the Applicant

Name of the Applicant

Address

Occupation

Signature of the Officer

Date of Issue of this Certificate

Signature of the Officer

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Beena Skaji