



INDIAN SCHOOL SOHAR

P.O. Box : 846, Postal Code : 311, Sohar, Sultanate of Oman

Telephone : +968 268 41 885

Email : office@indianschoolsohar.com

Website: www.indianschoolsohar.com

CBSE Affiliation No.: 6130006




TRANSFER CERTIFICATE

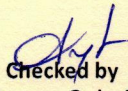
Affiliation No. 6130006
Sl.No. 2048


School Code. 90169
Admission No. 5830

1. Name of Pupil : ABHINAVKRISHNA GOVINDARAJAN S
2. Mother's Name : SANGEETHA KRISHNAMURTHY
3. Father's / Guardian's Name : GOVINDARAJAN LAKSHMANRAO
4. Date of Birth (in Christian Era) according to Admission and Withdrawal Register : (in figures): 01/10/2004
(in words): ONE OCTOBER TWO THOUSAND FOUR
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 : 02-03-2010 - UKG
8. Class in which the pupil last studied : (in figures) : XII(Sc) (in words): TWELFTH
9. School / Board Annual examination last taken with result : PASSED
10. Whether failed, if so once / twice in the same class: : N/A
11. Subjects Studied : CHEMISTRY, PHYSICS, ENGLISH, INFORMATICS PRACTICES, MATHEMATICS (E1)
12. Whether qualified for promotion to the higher class : YES
(in figures) ----- (in words) : -----
13. Month upto which the pupil has paid school dues : FULL PAID
14. Any fee concession availed of. If so, the nature of such concession : -----
15. Total No. of working days in the academic session : 193
16. Total No. of working days pupil present in the school : 180
17. Whether NCC Cadet / Boy Scout / Girl Guide (details may be given) : BOY SCOUT
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 : 14/05/2023
21. Date of issue of certificate: : 14/05/2023
22. Reason for leaving the school : PARENT'S REQUEST
23. Any other remarks : NO

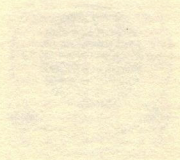



Signature of Class Teacher


Checked by
(with full name & designation)


Signature of Principal with date
School Seal

INDIAN SCHOOL SOLAR



Principal
Indian School Solar
P.O. Solar
Tal. Koppal
Dist. Channarayana

PROGRESS REPORT

Name of the student: _____

Roll No: _____

Class: _____

Section: _____

Teacher: _____

Subject: _____

Period: _____

Date: _____

Place: _____

Time: _____

Day: _____

Month: _____

Year: _____

Signature: _____

Name: _____

Address: _____

City: _____

State: _____

Country: _____



Shreyas

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