



INDIAN SCHOOL SOHAR

P.O.Box: 846, Postal Code: 311, Sohar, Sultanate of Oman
Telephone: +968 268 41 885, Fax: 26844504
E-mail: office@indianschoolsohar.com
Website: www.indianschoolsohar.com
CBSE Affiliation No.: 6130006



TRANSFER CERTIFICATE

Affiliation No. 6130006
Sl.No. 2080

School Code. 90169
Admission No. 6068

1. Name of Pupil : SABREEN ISHTEYAQUE
2. Mother's Name : SHAFQUAT AFREEN
3. Father's / Guardian's Name : MOHAMMAD ISHTEYAQUE AHMED
4. Date of Birth (in Christian Era) according to Admission and Withdrawal Register : (in figures): 09/03/2005
(in words): NINE MARCH TWO THOUSAND FIVE
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 : 07-06-2010 - UKG
8. Class in which the pupil last studied : (in figures) : XII (Com) (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 : ACCOUNTANCY, BUSINESS STUDIES, ENGLISH, ECONOMICS, INFORMATICS PRACTICES
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 : 202
16. Total No. of working days pupil present in the school : 178
17. Whether NCC Cadet / Boy Scout / Girl Guide (details may be given) : GIRL GUIDE
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 : 03/08/2023
21. Date of issue of certificate: : 03/08/2023
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 SOHAR

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E-mail: info@indianschoolsohar.com
Website: www.indianschoolsohar.com
CISSE Affiliated School



TRANSFER CERTIFICATE

Form No. 10
Date: _____

Roll No. _____
Class _____

1. Name of the student	_____
2. Name of the parent/guardian	_____
3. Date of birth (in Claret) and according to Islamic calendar	_____
4. Address of the student	_____
5. Address of the parent/guardian	_____
6. Date of admission to the school	_____
7. Date of last examination in the school with class	_____
8. Date on which the student has studied	_____
9. School / Board / Annual examination for which the student has appeared	_____
10. Marks obtained in the above examination	_____
11. Subjects studied	_____
12. Whether qualified for promotion to the higher class	_____
13. Date on which the student has studied	_____
14. Date of completion of the school with class	_____
15. Date of working days in the academic session	_____
16. Date of working days actually present in the school	_____
17. Whether the student has studied in the school	_____
18. Date of admission to the school	_____
19. Date of last examination in the school	_____
20. Date of completion of the school	_____
21. Date of working days in the school	_____
22. Date of last examination in the school	_____
23. Date of completion of the school	_____



Sabreen Ishteyagme
Sabreen

Principal

Headmaster
