

Affiliation No. 6130006

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



School Code. 90169

TRANSFER CERTIFICATE

| Sl.No. 2389 | Admission No. 13945 | |
|--|---|------------------------------|
| 1. Name of Pupil | : SANVIYA NAIKKER VALAPPE | |
| 2. Mother's Name | : ANJELI SAJITHKUMAR | |
| 3. Father's / Guardian's Name | : SAJITHKUMAR NAIKKER VALAPPE | |
| Date of Birth (in Christian Era) according to Admission and ^{4.} Withdrawal Register | : (in figures): 11/12/2013 | |
| | (in words): ELEVEN DECEMBER TWO THOUSAND THIRTEEN | |
| 5. Nationality | : INDIAN | |
| 6. Tribe or OBC | | |
| 7. Date of first admission in the school with class | : 23-05-2022 - Class IV | |
| 8. Class in which the pupil last studied | : (in figures) : IV (in words): FOURTH | |
| 9 School / Board Annual examination last taken with result | : PROMOTED TO CLASS V | |
| 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 | :YES | |
| | (in figures) V (in words) : FIVE | |
| 13.Month upto which the pupil has paid school dues | : MARCH-2024 | |
| Any fee concession availed of. If so, the nature of such concession | : NO | |
| 15.Total No. of working days in the academic session | : 177 | |
| 16.Total No. of working days pupil present in the school | : 126 | |
| ^{17.} given) | | |
| Games played or extra curricular activities in which the pupil $^{\mbox{18}\mbox{.}}$ usually took part: | : CERTIFICATES ISSUED TO THE CHILD FOR THE ACHIEVEMENTS | |
| (mention achievement level therein) | | 19 44 |
| 19.General Conduct | : GOOD | 7 P.O.Box: 846 P.C: 311 # |
| 20.Date of application for certificate | : 13/03/2024 | Suttanate Or Ornan |
| 21.Date of issue of certificate: | : 24/03/2024 | Indian School - ect |
| 22.Reason for leaving the school | : PARENT'S REQUEST | |
| 23.Any other remarks | : NO | 1 |
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Signature of Class Teacher

Checked by (with full name & designation)

Overma.

Signature of Principal with date School Seal

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