



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. 1356

School Code. 90169

Admission No. 7218

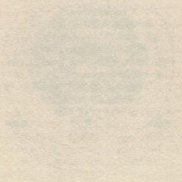
1. Name of Pupil : DHARINEESH SHANKARA MURUGAN
2. Mother's Name : JOTHIKIRUTHIKA
3. Father's / Guardian's Name : SHANKARA MURUGAN
4. Date of Birth (in Christian Era) according to Admission and Withdrawal Register : (in figures): 26/02/2009
(in words): TWENTY SIX FEBRUARY TWO THOUSAND NINE
5. Nationality : INDIAN
6. Whether the candidate belongs to Schedule Caste or Schedule Tribe or OBC : -----
7. Date of first admission in the school with class : 03-04-2012 - LKG
8. Class in which the pupil last studied : (in figures) : VIII (in words): EIGHTH
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 : ENGLISH, MATHEMATICS, SCIENCE, SOCIAL SCIENCE, HINDI (2L), ARABIC (3L)
12. Whether qualified for promotion to the higher class : YES
(in figures) IX (in words) : NINTH
13. Month upto which the pupil has paid school dues : MARCH-2022
14. Any fee concession availed of. If so, the nature of such concession: NO
15. Total No. of working days in the academic session : 178
16. Total No. of working days pupil present in the school : 169
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 : 22/03/2022
21. Date of issue of certificate: : 24/03/2022
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



MEMBERSHIP LIST

No.	Name	Address	Profession	Remarks
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
26				
27				
28				
29				
30				
31				
32				
33				
34				
35				
36				
37				
38				
39				
40				
41				
42				
43				
44				
45				
46				
47				
48				
49				
50				
51				
52				
53				
54				
55				
56				
57				
58				
59				
60				
61				
62				
63				
64				
65				
66				
67				
68				
69				
70				
71				
72				
73				
74				
75				
76				
77				
78				
79				
80				
81				
82				
83				
84				
85				
86				
87				
88				
89				
90				
91				
92				
93				
94				
95				
96				
97				
98				
99				
100				

S. Jothukiruthika

[Handwritten signature]

