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D.A.V. PUBLIC SCHOOL

S.E.C.L. BHATGAON

DIST: SURAJPUR (C.G) - 497235

(Managed by D.A.V. College Managing Committee, Chitragupta Road, New Delhi)

(Affiliated to C.B.S.E. New Delhi, Vide Aff.No. 3330036)

E-Mail Id: davbhatgaon@gmail.com

Website: www.davbhatgaon.org

TRANSFER CERTIFICATE

SEMIS CODE: 220215022403


U-DISE CODE: 22271502421

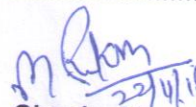
School Code: 03492

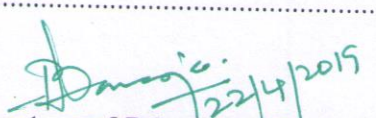
TC. No 1759

Admission No 3103

1. Name of Pupil **AKHIL KUJUR**
2. Mother's Name **LAXMANI KUJUR**
3. Father's / Guardian Name **BIRENDRA KUJUR**
4. Date of Birth (in Christian Era) according to Admission and Withdrawal Register
(in figures) **28-02-2012** (in words) **TWENTY EIGHTH FEBRUARY TWO THOUSAND TWELVE**
5. Nationality **INDIAN**
6. Whether the candidate belongs to Scheduled Caste or Scheduled Tribe or OBC **ST**
7. Date of the first admission in the School with class **Class : LKG** Dated **29-03-2016**
8. Class in which the pupil last studied (in figures) **Class : I** (in words) **FIRST**
9. School / Board Annual examination last taken with result **PASSED CLASS I EXAMINATION:2019**
10. Whether failed, if so once / twice in the same class **-NO-**
11. Subject Studied **ENGLISH, MATHS, E.ST., HINDI, G.K., D.S.**
12. Whether qualified for promotion to the higher class **-YES-**
If so, to which class (in figures) **II** (in words) **SECOND**
13. Month upto which the pupil has paid school dues **MARCH-2019**
14. Any fee concession availed of. If so, the nature of such concessions **-NO-**
15. Total No. of working days in the academic session **226**
16. Total No. of working days pupil present in the school **212**
17. Whether NCC Cadet / boy Scout / Girl Guide (details may be given) **-NO-**
18. Games played / extra-curricular activities in which the pupil usually took part (mention achievement level there in)
19. General Conduct **-GOOD-**
20. Date of application for certificate **18.04.2019**
21. Date of issue of certificate **22.04.2019**
22. Reason for leaving the school **ON REQUEST OF PARENTS**
23. Any other remarks **-N.A.-**


Signature of
Class Teacher


Checked by
(state full name and designation)


Signature of Principal with date
22/4/2019
Principal
School SEAT