

INDIAN SCHOOL AL BURAIMI

Application for TRANSFER CERTIFICATE

(To be filled in by Parent & Submit in Office)

From: _____

(Parent's Full Name in Resident Card)

Mobile No. _____ Date: _____

Name of the Student: _____ Class: _____ Sec: _____ GR.No. _____

Dear Sir,

I wish to withdraw my son/daughter from the school with effect from (Date) _____. The reason for the withdrawal is _____.

Therefore, I request you to issue a Transfer Certificate to my child and a Refundable Deposit of RO. _____ to return to me. It is understood that the payment of Refundable Deposit will be approximately 15 days from the date of submission of application form.

Thanking You,

Parent's Name : _____ Signature : _____ Date : _____

If any other child/children of yours is/are studying in the school

Sl No.	Name of the Student	Gr No.	Class	Sec.

FOR OFFICE USE ONLY

- a) Clearance from Librarian: _____
- b) Clearance from Science Lab: _____
- c) Class teacher's report/ remark on attendance: From: _____ To (Last attended to School) : _____

Number of days attended: _____, Number of school working days: _____ Total: _____ / _____

Class teacher's remark about progress of studies & behavior:

(Keep the Report card & Mark card Ready and delete student's name from the register)

Name of Class teacher: _____ Sign: _____ Date: _____

- d) Office /Accounts payment details:

School Fee Paid / Due if any: _____

Refundable Cheque Details:

Name of the Student: _____ **Class:** _____ **Sec:** _____ **GR.No.** _____

TC No. _____ **Cheque No.** _____ **Cheque Date:** _____ **PV No:** _____ **Ro:** _____

Cheque Payee: Father's /Mother's Name: _____

Accountant's Signature :

Principal's Signature

Application Received _____ Date: _____

TC Issued _____ Date : _____

Cheque Issued _____ Date : _____

TC & Cheque Received By : _____ Given Date: _____