## **School Leaving Certificate Application Form**

To,			
The Principa	l,		
St. Xavier's S	chool,		
Ward 3-B, Ad	dipur - Kachchh.	Date:	
Sir,	Kindly issue the School I	_eaving Certificate of my son/daugh	ter/ward by
name _			
Date of Birth	n/ stud	ying in Standard Divisio	on
(English Me	dium / Gujarati Medium	n), I apply for the leaving certific	ate due to
We have a	pplied / are applying fo	or our wards admission in (Name	of School)
		School located in	City
of	Taluka,	District,	State.
		and all librar	
Address:		Yours faith	fully,
Mobile No.:		Signature of Father of	or Guardian.
		ed till the month applied for Leaving ( other) has to come in person to collec	
	For	office use only	
General Reg	ister No:	Leaving Certificate No	o:
Aadhar DIES	UID No.:	Attendance:/	

Treasurer Librarian Class Teacher Principal