

FORM 5
[SEE RULE VI 17](1)]

TRANSFER CERTIFICATE

TC No. **162 / 2020 - 21**

Ad. No : **7815**

Name of School : **S N M HSS, PURAKKAD, ALAPPUZHA, Pin-690551**

Whether the School is
Govt, Aided or Recognised } **AIDED**

Name of the Pupil.....: **SANATHRAJ S**

Name of parent/guardian
and relationship of the
pupil to the guardian } **SURESH KUMAR**

Nationality.....: **INDIAN**

Religion.....: **Hindu**

Whether the pupil belongs to
SC/ ST/ OBC or whether he/she
is a convert from the SC/ ST } **OBC**

Date of Birth according to
Admission Register } **12/12/2002**
(Twelve December Two Thousand and Two)

Standard in which pupil was last enrolled.....: **PLUS TWO**

Date of admission or promotion to that standard....: **01/06/2020**

Whether qualified for promotion to a higher std....: ☒ Yes ☐ No

Whether the pupil has paid all the fees due.....: **Yes**

Whether the pupil was in receipt of fee concession ☐ Yes ☒ No

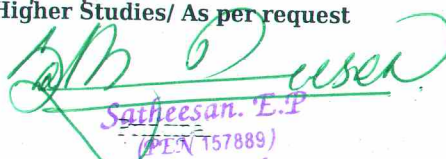
Date of pupil's last attendance at school.....: **31/03/2021**

Date on which the name was removed from roll.....: **31/03/2021**

Date of application for certificate.....: **24/08/2021**

Date of issue of certificate.....: **26/08/2021**

Reason for leaving.....: **Higher Studies/ As per request**


Sathiesan. E.P.
(PEN 157889)
Principal

S.N.M.H.S.S Purakkad-04049
Mob: 9446616643