

SRI SANKARA MATRICULATION HIGHER SECONDARY SCHOOL

Thiruvarur Main Road, Peralam - 609 405, Nannilam Tk., Thiruvarur D.T.

TMR Code No.: 52678 Certificate No.: 987445 Date: 04-03-2019

EMIS No.: |5||6||8||9||6||5||4||3||2||1||2||5||6|

Aadhar No.: 9 8 5 3 2 1 4 7 8 9 6 6

Admission No.

5159

TRANSFER CERTIFICATE

(Appendix 5, Chapter III Rule 34, T.N.E. Rules) Recognised by the Director of Matriculation Schools, Chennai - 6. 0029

Serial No.

Sri Sankara Matriculation Hr. Sec. School a. Name of the School

b. Name of the Educational District Nannilam. c. Name of the Revenue District Thiruvarur.

2. Name of the Pupil (in Block Letters) AKSHAYA. S

Pupil Name in Tamil

SANKARAMOORTHY S 3. Name of the Pupil's Father or Guardian

Name of the Pupil's Mother **RADHIKA**

INDIAN - HINDU 4. Nationality and Religion

VELLALAR 5. Community: Whether he / she belongs to

a) Adi Dravidar (Scheduled Caste or Scheduled Tribe)

b) Backward Class BC

c) Most Backward Class

d) Convert to Christianity from Scheduled Caste or

e) Denotified Communities

(If the Pupil belongs to any of the five categories mentioned above, write "YES" against the relevant item & also indicate

the particular community to which he / she belongs)

Sex 6. Female

Date of birth as entered in the 12-03-2009 admission register (in figures

and words) TWELFTH MARCH TWO THOUSAND NINE

Personal Marks (a) A MOLE ON THE LEFT HAND

of identification (b) A MARK ON THE FORE HEAD

Date of admission and standard in which he / she was 07-07-2016

admitted (the year to be entered in words) 10. Standard in which the pupil was studying at the time of leaving

(in words)

11. Whether qualified for promotion to higher standard YES

12. Whether the pupil has paid all the fees due to the school YES

13. Whether the pupil was in receipt of any scholarship NO (Nature of the scholarship to be specified)

14. Whether the pupil has undergone Medical Inspection during

the last academic year (First or Repeat to be specified)

15. Date on which the pupil actually left the school 04-03-2019

GOOD 16. The Pupil's conduct and Character

17. Date on which application for Transfer Certificate was made 04-03-2019

on behalf of the pupil by the Parent or Guardian

18. Date of the Transfer Certificate 19. Course of Study

Name of the School	Academic Year(s)	Standard(s) Studied	First Language	Medium of Instruction
Sri Sankara Matriculation Higher Secondary School,	2018-2019	IV	English	English
Peralam-609 405, Nannilam Tk., Thiruvarur D.T.				

NO

04-03-2019

Declaration by the Parent or Guardian:

I hereby declare that the particulars recorded against items 2 to 7 are correct and no change will be demanded by me in the future.

Signature of the Pupil. Signature of the Parent / Guardian.

Note: Erasures and unauthenticated or fraudulent alterations in the certificate will lead to its cancellation. Should be signed in ink by the Head of the Institution, who will be held responsible for the correctness of the entries.

^{20.} Signature of the Principal with Date and School Seal: