

SRI SANKARA MATRICULATION HIGHER SECONDARY SCHOOL

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

TMR Code No.: - Certificate No.: - Date: 09-03-2020

EMIS No.: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18

Admission No. 6601

TRANSFER CERTIFICATE

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

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1.	. a. Name of the School			:	: Sri Sankara Matriculation Hr. Sec. School			
	b. Name of the Educational District			:	Thiruvarur.			
	c. Name of the Revenue District				Thiruvarur.			
2.	2. Name of the Pupil (in Block Letters)				AADESH S			
	Pupil Name in Tamil							
3.	Name of the Pupil's Father or Guardian Name of the Pupil's Mother			:	SELVAKUMAR K			
				:	<u>-</u>			
4.	Nationality and Religion :			:	INDIAN			
5.				:	OTTAR			
				:	: -			
				:	-			
				:	MBC			
	d) Convert to Christianity from Scheduled Caste or			:				
	e) Denotified Communities			:				
	(If the Pupil belongs to any of the five categories mentioned above			ove, w	rite "YES" against the relevant item & also indicate			
	the particular community to which he	e / she	belongs)					
6.	Sex			:	Male			
7.	Date of birth as entered in the admission register (in figures	:	28-08-2014					
	and words)	:	-					
8.	Personal Marks (a)		-					
	of identification (b)	:	-					
9.	Date of admission and standard in v	vhich h	e / she was admitted	٦٠	30-05-2018			
0.	(Date of admission in words)				-			
10. Standard in which the pupil was studying at the time of leaving				•				
	(in words)		a and ame or loaving	:	<u>-</u>			
11.	11. Whether qualified for promotion to higher standard :				<u>- </u>			
12.	Whether the pupil has paid all the fe	es due	to the school	:	<u>-</u>			
13.	13. Whether the pupil was in receipt of any scholarship							
	(Nature of the scholarship to be specified)			•				
14.	14. Whether the pupil has undergone Medical Inspection during the last academic year (First or Repeat to be specified)			<u>-</u>				
15.	15. Date on which the pupil actually left the school :				09-03-2020			
16.	16. The Pupil's conduct and Character :				<u>-</u>			
17. Date on which application for Transfer Certificate was made on behalf of the pupil by the Parent or Guardian				09-03-2020				
18.	18. Date of the Transfer Certificate :				09-03-2020			

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

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

Declaration by the Parent or Guardian:

19. Course of Study

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.