

SRI SANKARA MATRICULATION HIGHER SECONDARY SCHOOL

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

TMR Code No.: -Certificate No.: -Date: 20-05-2019

EMIS No.: 3 3 2 0 0 4 0 5 4 0 5 0 2 3 8 9 Admission No.

5632

TRANSFER CERTIFICATE

(Appendix 5, Chapter III Rule 34, T.N.E. Rules) Recognised by the Director of Matriculation Schools, Chennai - 6. Serial No.

36/2019-20

1.	a. Name of the School			:	Sri Sankara Matriculation Hr. Sec. School		
	b. Name of the Educational District			:	Nannilam.		
	c. Name of the Revenue District			:	Thiruvarur.		
2.	Name of the Pupil (in Block Letters)			:	VISHNU KUMAR B		
	Pupil Name in Tamil						
3.	. Name of the Pupil's Father or Guardian Name of the Pupil's Mother			:	BALU K		
				:	SELVARANI B		
4.	Nationality and Religion				INDIAN - HINDU		
5.	Community: Whether he / she belongs to				<u>-</u>		
	a) Adi Dravidar (Scheduled Caste or Scheduled Tribe)			:	-		
	b) Backward Class				-		
	c) Most Backward Class				YES-PADAIYACHI		
	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 h	e / she	belongs)				
6.	Sex			:	Male		
7.	Date of birth as entered in the admission register (in figures	:	07-10-2005	2005			
	and words)	:	SEVEN-OCTOBER-TWO THOUSHAND AND FIVE				
8.	Personal Marks (a)	A MOLE ON THE RIGHT HAND FINGER					
	of identification (b) : -						
9.	Date of admission and standard in which he / she was admitted			ed :	30-04-2015/VI		
	(Date of admission in words)			:	THIRTY-FOUR-TWO THOUSHAND AND FIFTEEN		
10.	10. Standard in which the pupil was studying at the time of leavi (in words)				NINETH STANDARD		
11.	11. Whether qualified for promotion to higher standard				PROMOTED		
	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)			:	NO		

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

16. The Pupil's conduct and Character

17. Date on which application for Transfer Certificate was made on behalf of the pupil by the Parent or Guardian

18. Date of the Transfer Certificate

20-05-2019

GOOD

05-04-2019

17-05-2019

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, Peralam-609 405, Nannilam Tk., Thiruvarur D.T.	2015	VI	Tamil	English
	2019	IX	Tamil	English
	-	-	-	-

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

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.