



SRI SANKARA MATRICULATION HIGHER SECONDARY SCHOOL

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

TMR Code No.: - Certificate No.: - Date: 01-05-2019

EMIS No.: [] [] [] [] [] [] [] [] [] [] [] [] [] [] [] []

Admission No.

6601

Serial No.

-

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

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)

:

AADESH S

Pupil Name in Tamil

:

3. Name of the Pupil's Father or Guardian

:

SELVAKUMAR K

Name of the Pupil's Mother

:

-

4. Nationality and Religion

:

INDIAN - -

5. Community : Whether he / she belongs to

:

OTTAR

a) Adi Dravidar (Scheduled Caste or Scheduled Tribe)

:

-

b) Backward Class

:

-

c) Most Backward Class

:

MBC

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)

6. Sex

:

Male

7. Date of birth as entered in the admission register (in figures and words)

:

28-08-2014

8. Personal Marks (a) of identification (b)

:

-

9. Date of admission and standard in which he / she was admitted : (Date of admission in words)

:

30-05-2018

10. Standard in which the pupil was studying at the time of leaving (in words)

:

-

11. Whether qualified for promotion to higher standard

:

-

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

:

-

13. Whether the pupil was in receipt of any scholarship (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

:

01-05-2019

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

:

01-05-2019

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, Peralam-609 405, Nannilam Tk., Thiruvarur D.T.	-	L.K.G	English	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.