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# D.A.V. PUBLIC SCHOOL

S.E.C.L. BHATGAON

DIST: SURAJPUR (C.G) - 497235

(Managed by D.A.V. College Managing Committee, Chitragupta Road, New Delhi)

(Affiliated to C.B.S.E. New Delhi, Vide Aff.No. 3330036)

E-Mail Id: daybhatgaon@gmail.com

Website: www.daybhatgaon.org

## TRANSFER CERTIFICATE


U-DISE CODE: 22271502414


School Code: 15060


TC. No 1963

Admission No -2454

- Name of Pupil ..... AVINASH SHARMA
- Mother's Name ..... MEENA SHARMA
- Father's / Guardian Name ..... RAM PRASAD SHARMA
- Date of Birth (in Christian Era) according to Admission and Withdrawal Register  
(in figures) ..... 23-10-2002 (in words) ..... TWENTY THIRD OCTOBER TWO THOUSAND TWO
- Nationality ..... INDIAN
- Whether the candidate belongs to Scheduled Caste or Scheduled Tribe or OBC ..... GENERAL
- Date of the first admission in the School with class ..... Class : V ..... Dated ..... 18-07-2012
- Class in which the pupil last studied (in figures) ..... Class : XII ..... (in words) .....
- School / Board Annual examination last taken with result ..... PASSED (CLASS-XII) AISSC EXAMINATION-2020
- Whether failed, if so once / twice in the same class ..... NO
- Subject Studied ..... ENGLISH, PHYSICS, CHEMISTRY, BIOLOGY, P.ED
- Whether qualified for promotion to the higher class ..... YES  
If so, to which class (in figures) ..... HIGHER STUDIES (in words) .....
- Month upto which the pupil has paid school dues ..... MARCH-2020
- Any fee concession availed of. If so, the nature of such concessions ..... NO
- Total No. of working days in the academic session ..... 217
- Total No. of working days pupil present in the school ..... 183
- Whether NCC Cadet / boy Scout / Girl Guide (details may be given) ..... NA
- Games played / extra-curricular activities in which the pupil usually took part (mention achievement level there in) ..... NA
- General Conduct ..... GOOD
- Date of application for certificate ..... 02.09.2020
- Date of issue of certificate ..... 02.09.2020
- Reason for leaving the school ..... FOR HIGHER STUDIES
- Any other remarks ..... NA

  
Signature of  
Class Teacher

  
Checked by  
(state full name and designation)

  
Signature of Principal with date  
school SEAL