

+91 93025 11111, +91 93001 10033

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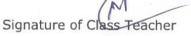
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Principal's Signature with Seal Burhanpur (M.P.)

contact@mvaburhanpur.com

www.mvaburhanpur.com

Affiliated to Central Board of Secondary Education, Bharat Affiliated No.: 1030178 School No.: 50156 Dise Code : 23480209405	
	Transfer Certificate
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Deel	Admission No. + 2542
	K No. : 20 S.L. No. : 1969 Admission No. : 3543
1.	Name of Pupil TANUJ PATIL
2.	Mother's Name KANCHAN PATIL
3.	Father's / Guardian's Name KRISHNA PATIL
4.	Date of birth (in Christian Era)according to admission register(In Figures) 02-Aug-2006 (In words) SECOND AUGUST TWO THOUSAND SIX
5.	Nationality INDIAN
6.	Whether the candidate belongs to Scheduled Cast or Scheduled Tribe OBC OBC -
7.	Date of first admission in the School with Class 18-Jan-2013 , 01
8.	Class in which the pupil last studied (In Figures) 10th
	(In words) TENTH
9.	School / Board's Annual Examination last taken with result 10th PASSED
10.	Whether failed, if so once / twice in the same class NO
11.	Subjects studied ENGLISH LANG. & LIT., HINDI COURSE-B, MATHEMATICS, SCIENCE, SOCIAL SCIENCE, INFORMATION TECHNOLOGY.
12.	Whether qualified for promotion to higher class YES
	if so to which class (In figure) 11th (In words) ELEVENTH
13.	Month upto which the (pupil has paid) school dues / Paid 31-Mar-2023
14.	Any fees concession availed of if so the nature of such concession NO
15.	Total No. of working days in academic session 220
16.	Total No. of working days pupil present in the school 210
17.	Whether NCC Cadet / Boy Scout / Girl Guide (Details may be given) NO
18.	Games played or extra-curricular activities in which the pupil usually took part (mention achievement level there in)
_	INDOOR GAMES
19.	General conduct GOOD
20.	Date of application for certificate 30-Jun-2023
21.	Date of issue of certificate 03-Jul-2023
22.	Reason for leaving the school PARENT'S WISH
23.	Any other remarks ALL DUES PAID



Finil Yende Prepared & Checked by (Full Name & Designation)

Near All Is Well Hospital, Mohammadpura, Burhanpur 450331 (M.P.) INDIA

