



Zydu School for Excellence – Godhavi

Survey No. 766 & 767, Nr. Village Godhavi, Ahmedabad-382115

Phone: +91-8141015151, 8141016161 E-mail: principal.zse2@gmail.com, www.zydu school.org

TRANSFER CERTIFICATE

CBSE Affiliation No. : 430196

School Code No. 10180

Book No. 049

Sl. No. 1573

Admission No. : 2167/A

1. Name of Pupil	MOHAMMAD UJEB GHANCHI.
2. Male / Female	MALE.
3. Mother's Name	GHANCHI RESHMABEN.
4. Father's Name / Guardian's Name	GHANCHI SADIKBHAI.
5. Nationality & Religion	INDIAN - MUSLIM.
6. Whether the candidate belongs to SC/ST/OBC	OBC.
7. Date of first admission in the school with class	18-09-2020 - CLASS - I - RTE.
8. Date of Birth according to Admission Register (in figure) (in words)	06-03-2014 - SIXTH MARCH TWO THOUSAND FOURTEEN.
9. Place of birth	SANAND.
10. Class in which the pupil last studied (in figure) (in words)	IN CLASS - V - FIFTH.
11. School / Board's Annual Examination last taken with Result	SCHOOL ANNUAL EXAM-2024-25 DETAINED IN CLASS - V
12. Whether failed. If so once / twice in the same class	YES - ONCE.
13. Subjects studied	1. ENG. 2. HINDI 3. EVS 4. MATH 5. GWT. 6. COMP.
14. Whether qualified for promotion to the higher class. If so to which class (in figure / words)	NO
15. Month up to which the (pupil has paid) school dues / paid	N.A.
16. Any fee concession availed of, if so the nature of such concession	YES - 100% - ADMISSION UNDER RTE CATEGORY.
17. Total number of working days	134
18. Total number of working days present	130
19. Whether NCC cadet / Boy Scout / Girl Guide	NO
20. Games played or extra curricular activities in which the pupil usually took part (mention achievement level therein)	YOGA.
21. General Conduct	Good
22. Date of application for certificate	18-03-2025.
23. Date of issue of certificate	25-03-2025.
24. Reason for leaving the school	CHANGE OF BOARD.
25. Any other remarks	PEN NO: 20862153779. VID: 240704026122010092

APAR ID : 827435178662.
Certified that the above information is in accordance with the School Register.

Archana Chatterjee
Signature of
Class teacher

[Signature]
Checked by
(state full name & designation)

[Signature]
Signature & Seal of
Principal

