



Zydus School for Excellence – Godhavi

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

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

TRANSFER CERTIFICATE

CBSE Affiliation No. : 430196

School Code No. 10180

Book No. 053 Sl. No. 1679 Admission No. : 1027/A

1. Name of Pupil	DHYANTI RAJANIKANT PATEL
2. Male / Female	FEMALE.
3. Mother's Name	BHAVIKA RAJANIKANT PATEL
4. Father's Name / Guardian's Name	RAJANIKANT BALDEVBHAI PATEL
5. Nationality & Religion	INDIAN - HINDU.
6. Whether the candidate belongs to SC/ST/OBC	-
7. Date of first admission in the school with class	07-02-2013 - CLASS - JR.KG.
8. Date of Birth according to Admission Register	(in figure) 20-11-2009 - TWENTIETH NOVEMBER (in words) TWO THOUSAND NINE.
9. Place of birth	AHMEDABAD.
10. Class in which the pupil last studied	(in figure) (in words) IN-CLASS - X - TENTH
11. School / Board's Annual Examination last taken with Result	AISSE - 2024-25 PASSED.
12. Whether failed. If so once / twice in the same class	NO.
13. Subjects studied	1 ENG - HINDI 2 MATH 3 SCI 4 S.S. 5 COMP. 6 APPL. 7 IT 8
14. Whether qualified for promotion to the higher class. If so to which class (in figure / words)	YES - TO CLASS - XI - ELEVENTH
15. Month up to which the (pupil has paid) school dues / paid	PAID UP TO - MARCH - 2025
16. Any fee concession availed of, if so the nature of such concession	NO
17. Total number of working days	236
18. Total number of working days present	215
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	10-06-25
23. Date of issue of certificate	17-06-25
24. Reason for leaving the school	CHANGE OF BOARD.
25. Any other remarks	PEN NO: 20198231707 UID: 240704026121520029

APAR ID: 663667511179.

Certified that the above information is in accordance with the School Register.

[Signature]
Signature of
Class teacher

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

[Signature]
Signature & Seal of
Principal

