



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. 056 Sl. No. 1765

Admission No. : 2760/A

1. Name of Pupil	DIVYARAJSINH VIJAYSINH GOHIL	
2. Male / Female	MALE	
3. Mother's Name	HEMAKSHIRA VIJAYSINH GOHIL	
4. Father's Name / Guardian's Name	VIJAYSINH GOHIL	
5. Nationality & Religion	INDIAN - HINDU - KARADIYA RAITUT.	
6. Whether the candidate belongs to SC/ST/OBC	OBC	
7. Date of first admission in the school with class	22-05-2024 - CLASS - XI - SCI.	
8. Date of Birth according to Admission Register	(in figure) (in words)	21-08-2008 - TWENTY FIRST AUGUST TWO THOUSAND EIGHT.
9. Place of birth	AHMEDABAD	
10. Class in which the pupil last studied	(in figure) (in words)	IN CLASS - XII - TWELFTH
11. School / Board's Annual Examination last taken with Result	AISSEE - 2025-26. PASSED	
12. Whether failed. If so once / twice in the same class	NO	
13. Subjects studied	ENG-1 CORE, 2 PHYS, 3 CHEM, 4 MATH, 5 P.E. 6	
14. Whether qualified for promotion to the higher class. If so to which class (in figure / words)	YES	
15. Month up to which the (pupil has paid) school dues / paid	PAID UPTO - MARCH - 2026	
16. Any fee concession availed of, if so the nature of such concession	NO	
17. Total number of working days	237	
18. Total number of working days present	208	
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	13-05-2026	
23. Date of issue of certificate	18-05-2026	
24. Reason for leaving the school	FOR HIGHER STUDIES.	
25. UDISE No.	240705004371710091	
PEN No.	20349609290	
APAAR ID.	518092454197.	

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

Signature of
Class teacher

Checked by
(state full name & designation)



Signature & Seal of
Principal