



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

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

TRANSFER CERTIFICATE

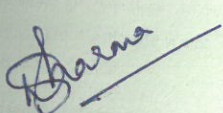
CBSE Affiliation No. : 430196

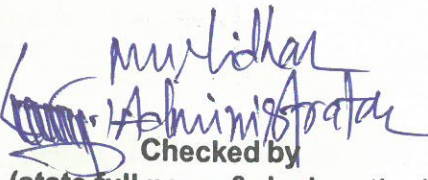
School Code No. 10180

Book No. 028 Sl. No. 919 Admission No. : 1670/A

| | |
|--|--|
| 1. Name of Pupil | PRANSHU RAT SANGHAVI. |
| 2. Male / Female | MALE. |
| 3. Mother's Name | KHYATI RAT SANGHAVI. |
| 4. Father's Name / Guardian's Name | RAT SANGHAVI |
| 5. Nationality & Religion | INDIAN - HINDU |
| 6. Whether the candidate belongs to SC/ST/OBC | - |
| 7. Date of first admission in the school with class | 13-01-2017 - CLASS - JR.KG. |
| 8. Date of Birth according to Admission Register (in figure) (in words) | 01-02-2013 - FIRST FEBRUARY TWO THOUSAND THIRTEEN |
| 9. Place of birth | AHMEDABAD. |
| 10. Class in which the pupil last studied (in figure) (in words) | IN CLASS - II - SECOND. |
| 11. School / Board's Annual Examination last taken with Result | SCHOOL ANNUAL EXAM-2020-21 PASSED. |
| 12. Whether failed. If so once / twice in the same class | NO. |
| 13. Subjects studied | 1 ENG 2 HINDI 3 MATH 4 EVS 5 COMP. 6 |
| 14. Whether qualified for promotion to the higher class. If so to which class (in figure / words) | YES - TO CLASS - III - THIRD. |
| 15. Month up to which the (pupil has paid) school dues / paid | PAID UP TO - MARCH-21. |
| 16. Any fee concession availed of, if so the nature of such concession | YES - 25% CONCESSION AVAILED DURING COVID-19 PANDEMIC YEAR AS PER, GOVERNMENT GUIDELINE. |
| 17. Total number of working days | 201 |
| 18. Total number of working days present | 188 |
| 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 | 18-02-2021 |
| 23. Date of issue of certificate | 26-03-2021. |
| 24. Reason for leaving the school | GOING ELSEWHERE FOR NOON SHIFT |
| 25. Any other remarks | UID- 240704026121910052. |

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

