

Zybus School for Excellence – Godhavi

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

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

TRANSFER CERTIFICATE


CBSE Affiliation No. : 430196

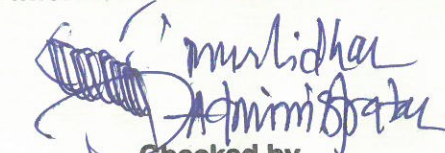
School Code No. 10180

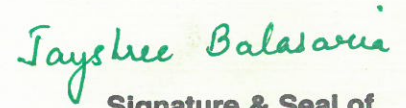
Book No. 043 SI. No. 1385 Admission No. : 2405/A.

1. Name of Pupil	MAHI ABHIJIT SHAH.
2. Male / Female	FEMALE.
3. Mother's Name	URVI SHAH
4. Father's Name / Guardian's Name	ABHIJIT SHAH.
5. Nationality & Religion	INDIAN - JAIN.
6. Whether the candidate belongs to SC/ST/OBC	MINORITY.
7. Date of first admission in the school with class	26-08-2022 - CLASS - VII.
8. Date of Birth according to Admission Register (in figure) (in words)	18-06-2010 - EIGHTEENTH JUNE TWO THOUSAND TEN.
9. Place of birth	AHMEDABAD.
10. Class in which the pupil last studied (in figure) (in words)	IN CLASS - VIII - EIGHTH.
11. School / Board's Annual Examination last taken with Result	SCHOOL ANNUAL EXAM- 2023-24. PASSED CLASS - VIII.
12. Whether failed. If so once / twice in the same class	NO.
13. Subjects studied	1 ENG 2 HINDI 3 MATH 4 SCI. 5 S.S. 6 GUJ.
14. Whether qualified for promotion to the higher class. If so to which class (in figure / words)	YES - TO CLASS - IX - NINTH.
15. Month up to which the (pupil has paid) school dues / paid	PAID UP TO - MARCH-2024.
16. Any fee concession availed of, if so the nature of such concession	NO.
17. Total number of working days	219
18. Total number of working days present	198
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	07-03-2024
23. Date of issue of certificate	23-03-2024.
24. Reason for leaving the school	RELOCATING ELSEWHERE.
25. Any other remarks / UID	242502058141610038.

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

