



VSKD GROUP OF INSTITUTIONS

Sarvan Khera, Kanpur D. – 209121 Ph. 05111-299155, 8052280001

Website: www.vskdgi.edu.in Email id: school@vskd.in

TRANSFER CERTIFICATE FORM

Sr. No. : _____

Appl. No. : _____

Reg. No. (in case IX to XII) : _____

1 Name of the Pupil : _____

2 Date of Birth : _____

3 Mother's Name : _____

4 Father's Name : _____

5 Guardian Name (if any) : _____

6 Cast : _____

7 Date of Admission in the school with class : _____

8 Class in which the pupil last studied: : _____

9 School/Board Annual exam last taken with Result : _____

10 Subject studies: : _____

11 Whether the pupil is N.C.C. Cadet (give details) : _____

12 Reason for leaving the school: : _____

13 Mobile No. : _____

14 Email id : _____

15 Address : _____

Date : _____

Full name of the pupil with Sign