

12. Whether the pupil has undergone any medical Check-up : ..... yes .....
13. Whether qualified for promotion to higher standard : ..... yes, Promoted to XI std .....
14. Whether the Pupil has paid all the fees due to the school : ..... YES .....
15. Whether the Pupil was in receipt of any Scholarship (Nature of the scholarship to be specified) or any Educational concessions : ..... NO .....
16. Date on which the pupil actually left the School : ..... 29.03.2019 .....
17. Total number of working days : ..... 231 .....
18. Total number of working days present : ..... 230 .....
19. The Pupil's Conduct and Character : ..... Good .....
20. Date on which application for Transfer Certificate was made on behalf of the pupil by the parent or guardian : ..... 06.05.2019 .....
21. Date of issue of Transfer Certificate : ..... 07.05.2019 .....
22. Course of Study : .....

Name of the School	Academic Year(s)	Standard(s) Studied	Second Language	Medium of Instruction
<b>SRI K.R.P. ACADEMY</b> CHITTODE, ERODE - 638 102.	<u>2009 -</u> <u>2019</u>	<u>I std</u> <u>XI std</u>	Tamil / Hindi	English

23. Signature of the PRINCIPAL with date and with School Seal



*[Handwritten Signature]*  
PRINCIPAL,  
SRI K.R.P.ACADEMY  
Bye-Pass Road,  
CHITTODE - 638 102  
Erode,  
Tamilnadu

### DECLARATION BY THE PARENT OR GUARDIAN

I hereby declare that the particulars recorded against items are 2 to 7 are correct and that no change will be demanded by me in future.

*[Handwritten Signature]*

Signature of the Student

*[Handwritten Signature]*  
S.K. Sharma  
7/5/19

Signature of the Parent / Guardian