

SRI VAGISVARI VIDYA MANDIR

2/59, PILCHINNAMPALAYAM (MANAL MEDU) VALPARAI ROAD, SAMATHUR → POLLACHI - 642 123. Phone: 271614

TRANSFER CERTIFICATE APPLICATION

STUDENT PARTICULARS: (In Block Letters) Date:				
Name Class Father's Address	Section s / Guardian's Name s :	Admission Nu	mber	
Shifting to other Local School, because of: (a) Distance Factor (b) Academics & General Environment of DPS (c) Parent's Transfer to another city (d) Shifting to a Boarding School (e) Passed Class XII (f) Any other Reason				
Please adjust any dues that stand in my ward's name against the security against the Deposit, Balance, if any, may be refunded to me through a Cheque and despatched in the attached self- addressed envelope. Cheque to be issued in favour of				
FOR OFFICE USE ONLY				
TC Application received on				
Remarks			Initials of P.A. to Principal	
S.No.	Section	Name	Remarks	Initials
1	CLASS TEACHER			
2	RESOURCE CENTRE			
3	PE DEPARTMENT			
4	LAB DUES			
5	MISCELLANEOUS DUES			
6.	ACCOUNTS DEPARTMENT Refund Details -	Security Deposit Hostel Education Fee Transport Fee Total Refundable Amount Less: Dues, if any Net Amount		
T.C. May be issued				
T.C. May not be issued		Principal's Signat		Date