



ST. THOMAS SCHOOL

Indraprastha Yojna, Pocket-H, Loni Road, Ghaziabad- 201003 (U.P)
Ph: 0120-2981063,64

APPLICATION FOR TRANSFER CERTIFICATE

PART – A (To be filled by Parent)

Respected Madam/ Sir,

With profound respect I beg to state the following for your necessary action. I wish to withdraw my Son/ Daughter whose particulars are given below:-

- (a) Name of the StudentClassSection.....
(b) Religion.....Caste.....State whether ST/SC/OBC.....
(c) Date of Birth..... (d) Admission No.
(e) Date of admission..... (f) Present class from which withdrawn.....
(g) Date of withdrawal.....
(h) Reason for withdrawal.....
(i) Name of the Parents (a) Father.....(b) Mother.....

**Please submit Rs. 100/- along with this duly filled form at the Office Fee Counter.*

Date.....

Signature of the Parent

For Office Use only

PART – B

NO DUES CERTIFICATE:-

- | | |
|------------------|---------------------|
| 1. Laboratory | 2. Library |
| 3. Class Teacher | 4. Sports Section |
| 5. Fee Section | Fee Paid till |

Certified that the T.C. can be issued in respect of the above student and no dues are outstanding / or the outstanding dues are reasonably adjusted and other particulars has been verified from the admission register And T.C. Receipt No Receipt Date is forwarded to you for approval.

WITHDRAWAL APPROVED/ NOT APPROVED. PREPARE THE T.C.

PRINCIPAL