



APPLICATION FORM FOR OBTAINING TRANSFER CERTIFICATE

To,
The Principal,
Delhi Public School Guwahati

Dear Sir/Madam,

I would like to withdraw my ward whose particulars are given below from your school with effect from _____
Kindly issue the Transfer Certificate.

Admission No:

Class/Sec:

Name of the Student (In Capital Letters)

:

Date of Birth

:

Nationality:

Admission Date & Class

:

Belongs to Schedule caste or Schedule Tribe

:

Father's Name

:

Mother's Name

:

Reason for withdrawal

:

Name & Address of the school in which admission is sought or planning for next studies:

Yours faithfully,

Thanking you.

Date: - _____

Name and Signature of Parent(s)

1. A minimum of 7 working days will be needed for the preparation of the Transfer Certificate.
2. In case an application for a Transfer Certificate (TC) is submitted and subsequently a request is made for its cancellation, such a request shall be entertained only if it is submitted in writing within 30 days from the date of the original TC application accompanied by the original TC, if already taken, and a TC Cancellation Fee of Rs.5,000.
3. If the student wishes to continue his or her studies at DPS Guwahati after the expiry of 30 days from the date of submission of the TC application, it shall be treated as a fresh admission, and all formalities applicable to new admissions, including payment of the prescribed admission fees must be completed.

REMARKS BY THE FOLLOWING HEADS

1. Class Teacher Name: Madam/Sir _____ Signature _____
A) Subjects Studied. 1) _____ 2) _____ 3) _____ 4) _____
5) _____ (6) Third Lang. _____
B) No. of working days _____ No. of working days present _____ (Till the date of applied)
2. Examination In Charge: _____ Pass/ Fail _____
3. Accounts Section (Fees): _____ Any fee concession _____ Signature _____
4. Sports (HOD) : Game of Choice _____ NCC: (Y/N) _____
Any achievement _____ ii) Signature _____
5. Computer : _____ 6. Science Lab.: _____
7. Music Faculty : _____ 8. Fine Arts : _____
9. Library : _____ 10. Hostel In-Charge: _____
11. CBSE Cell : _____

FOR OFFICE USE ONLY

All entries verifies by

Principal