



ARMY PUBLIC SCHOOL DAMANA
APPLICATION FORM : TRANSFER CERTIFICATE

MINIMUM SEVEN DAYS ARE REQUIRED FOR ISSUE OF TRANSFER CERTIFICATE

UDISE CODE:01130306801

ADM NO: _____

Name of Pupil: _____ CI/Sec: _____ Gender: _____

Mother's Name: _____ Father's Name: _____

Father's Rank(For Defence Personnel) : _____ Mobile No: 1. _____ 2. _____

Category: Army/Air Force/ Navy/ Def Civil/Civil: _____ Serving/ESM (for Defence Personnel only): _____

DOB:

| | | | | | | | |
|--|--|--|--|--|--|--|--|
| | | | | | | | |
|--|--|--|--|--|--|--|--|

Submit I-Card (Photocopy): _____

SUBJECTS 1. _____ 2. _____ 3. _____
4. _____ 5. _____ 6. _____
7. _____ 8. _____

Whether NCC Cadet/ Boy Scout/Girl Guide/ Cub / Bulbul / Bunny: _____

Games played or Co-curricular activities (mention achievement level therein): _____

Account Details

| | |
|----------------------|-----------------------|
| Account Holder Name: | Account Number: |
| Name of the Bank: | Branch (Location): |
| IFSC Code: | Acct. Holder Address: |

Deposited crossed Cheque No. _____ / Bank passbook photocopy.

I declare that the information submitted above is correct to my knowledge.

Signature of Parent with date _____ Form received by the date _____

NO OBJECTION CERTIFICATE(NA FOR BAL I – CL V)

- It is certified that there is nothing outstanding against _____ bearing Adm No. _____ and Roll No. _____ of Class/Sec _____.
- There is nothing to report:

| S No. | Deptt. | Sign. of I/C | S No. | Deptt. | Sign. of I/C |
|-------|----------------|--------------|--------|--------------------|--------------|
| (i) | Adm Office | | (viii) | CCA I/C | |
| (ii) | Adm Supervisor | | (ix) | Sports I/C | |
| (iii) | IT Supervisor | | (x) | Shooting I/C | |
| (iv) | Library I/C | | (xi) | NCC I/C | |
| (v) | Exam I/C | | (xii) | Scouts & Guide I/C | |
| (vi) | Science Lab | | (xiii) | Art & Craft I/C | |
| (vii) | ATL I/C | | (xiv) | Music I/C | |

Date: _____

Signature of Individual: _____

DETAILS BY CLASS TEACHER

Class Teacher Name: _____

Total No. of working days _____ Total No. of working days attended _____

Health Card Issued (Yes/No): _____

General Conduct : _____

STATUS: PASS/FAIL/STUDYING _____ (If FAIL, mark with Red Ink)

I have verified all details submitted.

Signature: Class Teacher _____ Exam I/C _____ Coordinator _____

OFFICE USE

Date of first Adm. in School with Class/Sec _____ Permanent Education No. _____

Fee paid up to month _____

PORTION BELOW FILLED IN BY THE FEE CLERK/ACCOUNT CLERK

| DETAILS OF REFUNDABLE AMOUNT | | | | | |
|------------------------------|-------------------|--------|-----|-------------------------------|--------|
| S NO | DETAILS | AMOUNT | SNO | DETAILS | AMOUNT |
| 1 | SECURITY DEPOSIT | | 9 | TUITION FEE | |
| 2 | DEVELOPMENT FUND | | 10 | PLAYWAY FUND | |
| 3 | SCHOOL JOURNAL | | 11 | SCIENCE FUND | |
| 4 | INSURANCE PREMIUM | | 12 | COMPUTER FEE(CAL) | |
| 5 | PUPIL'S FUND | | 13 | COMPUTR FEE/IP(CLXI-XII ONLY) | |
| 6 | LIBRARY FUND | | 14 | SMART CLASS FEE (TAL) | |
| 7 | SPORTS FUND | | | | |
| 8 | EXAMINATION FUND | | | TOTAL | |

A sum of Rs(fig) _____, (in words) _____

has been sent to above mentioned parent through NEFT vide HDFC Bank Bantalab, Jammu.

Cheque No. _____ Dated _____

Signature of Clerk with Designation: _____

(Signature of Principal)