

Vidhyashram

International School

Uchiyarda, Nandra Kallan, via-Saran Nagar, P.O. Jodhpur (Raj.) - 342 015 Tel. No.: 0291-2227976 • Mob. 6350289119, 9460251976 E-mail: contact@vidhyashram.edu.in • Website: www.vidhyashram.edu.in

Affiliated to CBSE - No. 1730268

Transfer Certificate

School Code - No. 16105 10613

Certificate No. 431/20-21 Admission No. 1886 **JAGRITI SONI** 01. Name of Pupil **KUSUM LATA SONI** 02. Mother's Name **MUKESH SONI** 03. Father's Name/Guardian's name 04. Date of Birth (in Christian Era) according to Admission & Withdrawal Register (in figures) 20/05/2004 (in words) TWENTY MAY TWO THOUSAND FOUR 05 ationality INDIAN 06. Whether the candidate belongs to Schedule Cast or Schedule Tribe 07. Date of First Admission in the School with Class 14/03/09 XII F 08. Class in which the pupil Last Studied (in Figures) (in words) 09. School / Board's Annual Examination Last taken with result AISSCE 2021 (CLASS XII) 10. Whether failed, if so once/twice in the same class NO ECONOMICS, ENGLISH, GEOGRAPHY, HISTORY, PAINTING 11. Subject Studied 12. Whether qualified for Promotion to the higher class if so, to which class (in figures) N/A (in words) NOT APPLICABLE JAN TO MARCH 13. Month up to which the (pupil has Paid) school dues 14. Any fee concession availed of: if so the nature of such concession 224 days 15. Total No. of Working Days in the academic session **170** days ital No. of working days present in the school 17. Whether NCC Cadet/Boy Scout/Girl Guide (details may be given) 18. Games played or extra-curricular activities in which the pupil usually took part (mention achievement level therein) 19. General Conduct GOOD 15/12/21 20. Date of Application for Certificate 21. Date of Issue of certificate 15/12/21 **HIGHER STUDIES** 22. Reason for Leaving the School

Signature of Class Teacher

23. Any other remarks

NIL

State full name & Designation

Principal Signature & Seal

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