



Run by : Shree Cloth Brokers' Association Trust  
**SHREE BAL VINAY MANDIR**

Chhatribagh, Indore Phone No. : 2349021, 2342688

Website : www.sbvmmchhatribagh.com

1670  
22-6-15

**TRANSFER CERTIFICATE**

Affiliation No. **1030640**

School Code **14522**

SI. No. **19**

Admission No. **9005**

- Name of Pupil : **NIKHIL JOSHI**
- Mother's Name : **KRISHNA JOSHI**
- Father's/Guardian's Name : **GIRDHAR JOSHI**
- Date of Birth (In Christian Era) according to Admission & Withdrawal Register  
(In Figures) : **17/12/1998** (In Words) : **Seventeen December Nineteen Ninety Eight**
- Nationality : **INDIAN**
- Whether the Candidate belongs to Scheduled Caste or Schedule Tribe or OBC : **GENERAL**
- Date of First Admission in the School with Class : **01/07/2002** **JR.KG**
- Class In Which Pupil Last Studied (In Figures) : **XI** (In Words) :
- School/Board Annual Examination Last taken with result : **SHREE BAL VINAY MANDIR / PASSED**
- Whether Failed, If So once/ Twice In the Same Class : **NO**
- Subject Studied : 1. **ECONOMICS** 2. **BUSINESS STUDIES** 3. **ACCOUNTS**  
4. **ENGLISH** 5. **MATHS** 6.
- Whether Qualified for Promotion to Higher Class : **YES**  
If So, to which class(In Figures) : **XII** (In words) : **[TWELFTH]**
- Month Upto Which the Pupil has paid, School Dues : **MARCH 2015**
- Any fee Concession availed of. If so the nature of such concession : **NO**
- Total No. of Working Days in the Academic Session : **213**
- Total No. of Working Days Pupil Present in the School : **120**
- Whether NCC Cadet/BoyScout/Girl Guide (details may be given) : **NO**
- Games played or extra curricular activities in which the pupil usually took part  
(mention, achievement level therein) **NO**
- General Conduct : **GOOD**
- Date of Application for Certificate :
- Date of Issue of Certificate : **10/06/2015**
- Reasons for Leaving the School : **PARENTS' REQUEST**
- Any Other Remarks : **N.A**

सत्यापित किया जाता है कि उपयुक्त विद्यालय  
 केन्द्रिय माध्यमिक शिक्षा बोर्ड, दिल्ली से संबद्ध है।  
 इस दस्तावेज में दिये गये विवरण का  
 सत्यापन संबंधित विद्यालय से कराया जाये।

*Signature*  
 अनुभाग अधिकारी/सहा.सचिव/क.ले.अ.  
 केन्द्रीय माध्यमिक शिक्षा बोर्ड  
 क्षेत्रीय कार्यालय, टोडरमल मार्ग  
 अजमेर-305030 (राजस्थान)

*Signature*  
 Signature of Class teacher

*Signature*  
 Checked by *Signature* (full name and designation)

*Signature*  
 Signature of Principal with Seal  
**Principal**