



FORM OF APPLICATION FOR TRANSFER CERTIFICATE

Name of Student:

Address:

Date of Birth: (in figures).....

(in words).....

Class & Subject:.....Period of Study:

Class No.:.....Admission No.:.....Date of Admission.....

Class of Leaving:Date of Leaving:.....

Additional Language Studied:.....

Subjects Studied Under Part III:.....

Details of University Examination:

Name of exam for which the student was last presented from the college:.....

Month & Year:.....Reg. No.:..... Whether Passed or Not:.....

Whether the student has cleared all the dues:.....

Reason for Leaving:.....

Whether the student has registered in college Alumni portal.....

Date:.....

Signature of the student:

Dues details (to be cleared)

Sl No.	Items	Amount Due	Remarks
1	O f f i c e	Semester Fees	
2		Uniform Fees	
3		Name Tag	
4		Text Books	
5		Stationery	
6		Others	
7	Library		
8	Departments		
9	Hostel Fees		
10	College Bus		
11	Hostel Warden		
12	Others		

Total:

Signature of Class Teacher with Remarks: _____

Signature of HOD with Remarks:

Sanctioned / Not Sanctioned

Principal