



# K.L.E. MAHADEVAPPA MUNAVALLI SCHOOL,

Opp. Umarani Hospital, Main Road, GOKAK - 591 307. Dist. Belagavi.

Website : www.klesgokak.com, E-mail : klesgokak@gmail.com

Affiliation to CBSE, New Delhi, Affiliation No. : 830216)

Phone : (08332) 229504

Sl. No. **018**

Book No. **02**

## TRANSFER CERTIFICATE

Admission No. **1620/2015**

1. Name of the pupil : **Raj. Naik**
2. Father's/Guardian's Name in full : **Sanjiv Naik**
3. Religion, Caste and Sub Caste : **Hindu Kshatriya**
4. Nationality : **Indian**
5. Whether the candidate belongs to scheduled caste or scheduled tribe : **NO**
6. Date of first admission in the school with class : **6.4.2015 class V**
7. Date of Birth (in Christian era) according to Admission Register in figures, in words : **08.03.2005 Eight March two thousand five**
8. Place of Birth : **GOKAK**
9. Class in which the pupil last studied in words and figures : **class Seventh VII (2018-19)**
10. School / Board Annual Examination last taken with result : **Passed VII (2018-19)**
11. Whether failed; if so once/twice in the same class : \_\_\_\_\_
12. Subjects studied compulsory : 1) English 2) Hindi 3) Kannada  
4) Mathematics 5) Science and Technology  
6) Social Science 7) EVS
13. Whether qualified for promotion to higher class if so, to which class : **Yes promoted to class VIII**
14. Month up to which the pupil has paid school dues / paid : **Paid**
15. Any fee concession availed, if so, the nature of such concession : \_\_\_\_\_
16. Total number of working days : **215 days**
17. Total number of working days present : **205 days**
18. Whether NCC Cadet/Boy Scout/ Girl-Guide/ (Details may be given) : \_\_\_\_\_
19. Games played or extra curricular activities in which the pupil usually took part (mention achievement level therein)\* : **Participated in all games and activities of the school**
20. General conduct : **Good**
21. Date of application for certificate : **12.04.2019**
22. Date of issue of certificate : **18.04.2019**
23. Reasons for leaving the school : **Parents request**
24. Any other remarks : **Disc code. 29300615305 STS 0526 79**



Checked by :  
(Full name & Designation)

**Principal**  
Principal

(Transfer certificate should be issued only under the signature of the regular principal/vice principal and it should be countersigned by an officer not below the rank of District Inspector of Schools of Education Dept. of the State/Regional Officer C.B.S.E.) \* District State National International