ARMY PUBLIC SCHOOL GWALIOR

APPLICATION FOR WITHDRAWAL/TRANSFER CERTIFICATE TO BE FILLED BY PARENT

1.	Name of the Student	:			
2.	Name of Mother	:			
3.	Name of Father	:			
4.	Class & Section Studyin	ıg :	:		
6.	Reason for Withrawal	:	:		
8.	Unit/Address	:	:Mob		
9.	Details of School in which Admission is planed:				
	(a) Name of School :				
	(b) School Contact Number :				
	I hereby declare that the above statement is correct to the best of my knowledge and belief.				
•	rification of Accountant)			(Signature of the Parent/Guardian)	
Note	(a) Copy of CBSE rea	gistration card	re reque <mark>sted to co</mark> llect the following from Exam cell. (b) Report C	ard from Class Teacher.	
			FILLED THE CLASS TEACHER		
10.	Admission No :				
13.	Date of Birth:				
15.	Result:		16. Present class studying :		
17.	Date of promotion to the class studying:				
19.	Date of deletion of the name from the class attendance register:				
20.	Total No. of working days of the school:				
21.	Subject: 1				
22.	Whether NCC cadet (Ye	es/No) [Yes if the	nem NO Dues by NCC Dept]		
(Si			Signature of NCC Incharge)	(Signature of Class Teacher)	
	ck off the name and issue			Principal	
				-	
Δdn	nission No. T		FOR OFFICE USE ONLY Security Denosit	Fees paid upto	
7 KGII	11351011 110		EIPT :- REFUND OF SECURITY	1 ces para apro	
	Details I	Refund	Recovery	Remarks	
	Security				
	uition Fee				
Annual Dues Total					
<u> </u>			7/0 7/0		
acco	unt No	Ban	kIFSC	are declare that myis correct and Fees receipt and cancelled cheque are	
	No			(Signature of Parents/Guardian)	