

Date: _____

Sr. No.: _____

A) Student Details

Student Name _____

Surname *First Name*

App / Enr No _____ Board _____ Grade _____ Division _____

☐ **Day Boarder**☐ **Weekly Boarding**

☐ Hostel

Please select (☑) B, C or D as applicable.

B) Leaving Certificate

Last Date of Attending School _____

Reason for Leaving School _____

C) Inter-VIBGYOR Transfer

Last Date of Attending Current School_____

Transfer To _____

Date of Admission in New School _____

Board of the New School	Grade	Division
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Reason for Transfer

D) Bonafide Certificate

E) Signature

Name: _____ Signature: _____

Relationship with student: ☐ Mother ☐ Father ☐ Guardian

For official use only

Approved By	Details	Signature	Date	Remark
Coordinator	Attendance & Marks Complete			
Librarian	No Books and Fines Pending			
Accounts	No dues Pending			
	<input type="checkbox"/> Fees Dept.			
	<input type="checkbox"/> Admin Dept.			
	<input type="checkbox"/> Bus Dept.			
Principal	NA			

Approved By	Details	Signature	Date
Attended By	NA		
System Entry By			
System Entry Confirmed By	NA		
Certificate Issued By			
Parent Acknowledgement of receipt	NA		
Comments:			