



FACULTY HIGHER SECONDARY SCHOOL

Under Osom Educational Trust
(CBSE Affiliation Number-230007)

NORTH GUWAHATI, GUWAHATI-781039

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Phone : +91-9207046128 / 33

TRANSFER CERTIFICATE

School Code :35091

Sl.No :2695

Admission No :4492

- 1.Name of the Student : **MUKUNDAMADHAV .R**
- 2.Mother's Name : **REESHA T.P**
3. Father's/Guardian's Name : **A.RAJESH**
- 4.Date of Birth (in Christian Era) according to Admission & Withdrawal Register: **28-01-2012** (in words)**Twenty Eighth January Two Thousand Twelve**
5. Proof for Date of Birth submitted at the time of admission :**BIRTH CERTIFICATE**
6. Nationality :**INDIAN**
7. Whether the candidate belongs to Schedule Caste or Schedule Tribe or OBC : **General**
8. Date of first admission in the School with class: **24-11-2015** in Class **LKG**
- 9.Class in which the pupil last studied (in figure):**3** (in words) **three**
- 10.School/Board Annual Examination last taken with result :**READING IN CLASS 4**
- 11.Whether failed, if so once/twice in the same class :**NO**

12.Subject Studied :

- | | | | |
|------------|---------------|------------|-------|
| 1.ENGLISH | 2.MATHEMATICS | 3.ASSAMESE | 4.EVS |
| 5.COMPUTER | 6.HINDI | 7. | 8. |

13.Whether qualified for promotion to the higher class :

If so, to which(in fig). (in words)

14.Total No. of working days in the academic session:**204**

15.Total No. of presence in the academic session :**150**

16.Month upto which the people has paid school dues : **DECEMBER 2021**

17.Any fee concession availed of, if so, the nature of such concession :**NO**

18. Whether NCC Cadet/Boy Scout/Girl Guide (details may be given) :**NA**

19. Whether school is under Govt./Minority/Independent Category :**INDEPENDENT**

20. Games played or extra curricular activities in which the pupil usually took part (mention achievement level therein) :**SPORTS**

21. Date of application for certificate :**07-12-2021**

22. Date on which pupils name was struck off the rolls of the school :**07-12-2021**

23. Date of issue of certificate :**07-12-2021**

24. Any other remarks :**Personal**

I hereby declare that the above information including Name of the Candidate, Father's Name, Mother's Name and Date of Birth furnished above is correct as per school records.



B. Baruah
Checked by
Office Superintendent
(State full name and designation)
FACULTY H. SEC. SCHOOL
Guwahati-39

Jugal Ch Baruah
Principal
Faculty H. Sec. School
Guwahati-39