

BOSTON PUBLIC SCHOOL

APPLICATION FOR T.C.

Date :

Please issue the following documents in respect of my child/ward as below :

- | | |
|---|---|
| <input type="checkbox"/> TRANSFER CERTIFICATE | <input type="checkbox"/> COUNTERSIGNED T.C. |
| <input type="checkbox"/> MARKSHEET | <input type="checkbox"/> CHARACTER CERTIFICATE / BONAFIDE CERTIFICATE |

STUDENT'S PARTICULARS

1. Name _____
2. Class _____ Sec. _____ Enrolment No.
3. Father's / Mother's / Guardian's Name _____
4. Address _____
5. Email ID _____ Mobile No.

Reason For TC

- | | |
|--|---|
| <input type="checkbox"/> Transfer of Parent | <input type="checkbox"/> Financial Problem |
| <input type="checkbox"/> Change of School (A) Local (B) Outstation | <input type="checkbox"/> Any other (Please specify) |

Signature of Father _____ Signature of Mother _____

FOR OFFICE USE ONLY

CLEARANCE DETAILS:-

SECTION	NAME	REMARKS	INITIALS
1. Class Teacher			
2. Library			
3. Sci. Lab. / EVS Lab			
4. Sports			
5. IC Smart Class			

Filled by the Class Teacher Total No. of working days till date (... / ... / ...) _____ Total Attendance _____

T.C. may be issued I/C's Signature : _____ Principal's Signature : _____

Clearance from Accounts

Dues	Amount	No Dues	Signature of A/C Deptt.
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T.C. issued on _____ T.C. No. _____