	HAL EDUCATION COMMITTEE (R)
SIST	
PEN:	# 20987094454 TRANSFER CERTIFICATE
SI. N	No
01.	Name of Pupil ADITHYARC
02.	Enthor's / Quardian's Nama RAVASAB BALU CHINCHANE
03.	Mother's Name RUPALI R.C.
04.	Nationality INDIAN
05.	Whathar the candidate belong to Scheduled Caste or Scheduled Tribe
06.	Data of first admission in the school with class $18 - 06 - 2012$
07.	Detend with (in Obviotion Era) according to admission register (in figures)
	FOUDTH JUN WO HOUSAND EIGHT
08.	Olecter in which the pupil last studied (in figures) X (in words)
09.	School / Roard Annual examination last taken with result TIAL IN EW IVIS LIC CT100L
10.	Whether failed, If so once / twice in the same class
11.	Subject studied: 1 ENGLISH 2 HINDI 3 MATHS 4 SCIENCE 5 SOCIAL SCIENCE
12.	Subject studied : 1.t
	if so, to which class ( in figure )
13.	Month upto which the pupil has paid school dues MARCH 2029
14.	Any fee concession availed of : if so, the nature of such concession
15.	Total No. of working days
16.	Total No. of working days when the pupil was present
17.	Whether NCC Cadet / Boy Scout / Girl Guide ( details may be given )
18.	Games played or extra - curricular activities in which the pupil usually took part (mention achievement level therein)
19.	General conduct
20.	Date of application for certificate 25.06.2024
21.	Date of issue of certificate 25.06 2024
22.	
23.	Any other remarks
	Dr. Om Singh Chundawat
Sig	(State full name) (State full name & designation)
Μ	C. PESET LIDUR DA DI C HAL Central Township, Namushi J.
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