



PRADNYA NIKETAN EDUCATION SOCIETY'S  
**THE ORCHID SCHOOL**

S.No. 80/1/2/1, Baner - Mhalunge Road,  
Baner, Pune: 411045, Maharashtra, India.  
Tel. : +91 - 20 - 6711 6711  
www.theorchidschool.org  
contactus@theorchidschool.org

**TRANSFER CERTIFICATE**

Affiliation No.: 1130279 School Code: 30212 UDISE: 27251400209  
Book No.: Sr.NO: 103 Admission No.: A-0614-19 G.R.No.: 2886

1. Name of Pupil : **SASHWAT SINGH**
2. Mother's Name : **APARNA SINGH**
3. Father's/Guardian's Name : **AMRENDRA KUMAR SINGH**
4. Date of Birth (in Christian Era) according to Admission & Withdrawal Register  
(in figures) **28 Jun 2013** (in words) **Twenty Eighth June Two Thousand Thirteen**
5. Nationality : **INDIAN**
6. Whether the candidate belongs to Schedule Caste or Schedule Tribe or OBC **NA**
7. Date of first admission in the School with Class **30.11.2018 IN CLASS I**
8. Class in which the pupil last studied (in figures) **I** (in words) **FIRST**
9. School / Board Annual examination last taken with result **COVID YEAR 2019-20 NO EXAMS PROMOTION AS PER CBSE DIRECTION**
10. Whether failed, If so once / twice in the same class **NA**
11. Subjects Studied : 1 **ENGLISH** 2 **HINDI** 3 **MARATHI** 4 **MATHS** 5 **EVS**  
6 **COMPUTER** 7 8
12. Whether qualified for promotion to the higher Class **YES**  
if so, to which class (in fig.) **II** (in words) **SECOND**
13. Month upto which the pupil has paid school dues **ALL DUES CLEARED**
14. Any fee concession available, if so nature of such concession **NA**
15. Total No. of working days in the academic session **161**
16. Total No. of working days pupil present in the school **120**
17. Whether NCC Cadet / Boy Scout / Girl Guide (details may be given) **NA**
18. Games played or extra curricular activities in which the pupil usually took part  
(mention achievement level therein) **PHYSICAL FITNESS**
19. General conduct **GOOD**
20. Date of application for certificate **29.07.2020**
21. Date of issue of TC **29.07.2020**
22. Reason for leaving the school **PARENTS REQUEST**
23. Any other remarks **NA**

Signature of  
Class Teacher

Checked by  
(with full name and designation)

Signature of Principal with date  
School Seal



The above information is in accordance with school records.