

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: 29

Admission No.: K-0584-19


G.R.No.: 3072

1. Name of Pupil : **SAMRIDDDHI SACHIN GANDHI**
2. Mother's Name : **RESHMA SACHIN GANDHI**
3. Father's/Guardian's Name : **SACHIN CHANDRAKANT GANDHI**
4. Date of Birth (in Christian Era) according to Admission & Withdrawal Register
(in figures) **05 Feb 2003** (in words) **Fifth February Two Thousand Three**
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 **07.06.2019 IN CLASS XI**
8. Class in which the pupil last studied (in figures) **XI** (in words) **ELEVENTH**
9. School / Board Annual examination last taken with result **CLASS XI SCHOOL FINAL EXAM**
10. Whether failed, If so once / twice in the same class **NA**
11. Subjects Studied : **1 ENGLISH 2 PHYSICS 3 CHEMISTRY 4 BIOLOGY 5 INFORMATICS PRACTICES**
6 7 8
12. Whether qualified for promotion to the higher Class **YES**
if so, to which class (in fig.) **XII** (in words) **TWELTH**
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 **202**
16. Total No. of working days pupil present in the school **107**
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) **BASKETBALL**
19. General conduct **GOOD**
20. Date of application for certificate **12.06.2020**
21. Date of issue of TC **22.06.2020**
22. Reason for leaving the school **PARENTS REQUEST**
23. Any other remarks **NA**


Signature of
Class Teacher

Baishali Bapat
Checked by
(with full name and designation)



For 
Signature of Principal with date
School Seal

The above information is in accordance with school records.