



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


S.No. 80/i/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: 239 Admission No.: A-0416-17 G.R.No.: 2386

1. Name of Pupil : **DHRUVIKA PORWAL**
2. Mother's Name : **DEEPIKA JAIN**
3. Father's/Guardian's Name : **DEVANSH PORWAL**
4. Date of Birth (in Christian Era) according to Admission & Withdrawal Register  
(in figures) **27 Oct 2011** (in words) **Twenty Seventh October Two Thousand Eleven**
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 **09.12.2016 IN CLASS I**
8. Class in which the pupil last studied (in figures) **IV** (in words) **FOURTH**
9. School / Board Annual examination last taken with result **IV MID TERM**
10. Whether failed, If so once / twice in the same class **NA**
11. Subjects Studied : 1 **ENGLISH** 2 **HINDI** 3 **MARATHI** 4 **SST** 5 **SCIENCE**  
6 **COMPUTER** 7 **MATHS** 8
12. Whether qualified for promotion to the higher Class **YES**  
if so, to which class (in fig.) **IV** (in words) **FOURTH**
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 **79**
16. Total No. of working days pupil present in the school **79**
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) **PERCUSSION, VISUAL ARTS, PHYSICAL EDUCATION(P.E)**
19. General conduct **GOOD**
20. Date of application for certificate **30.09.2020**
21. Date of issue of TC **17.10.2020**
22. Reason for leaving the school **SHIFTING TO U.S.**
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.