ST ALOYSIUS GONZAGA SCHOOL



PO Box No. - 720, Kodialbail, Mangaluru - 575003

Phone: 0824-2449724

(No Objection Certificate by Karnataka Govt.No. ED.208 PGC 2012) (Affiliated to CBSE, New Delhi - Affiliation No. 830650, School Code - 45575) DISE CODE: 29240302811



TRANSFER CERTIFICATE

T C No: 19/2021-22 Admission No: 107/367/2015-16 STS No: 024932265

T C No: 19/2021-22 Ac	dmission No: 107/367/2015-16	515 NO: U24932265
1. Name of the Student	: MOHAMMAD SHAHAL ABBAS	
2. Gender	: MALE	
3. Mother's Name	: SHAKIRA BANU	
4. Father's/Guardian's Name	: ABBAS AHAMED	
5. Date of Birth (in figures and in words)	: 28.11.2009, TWENTY EIGHT NOVEM	BER TWO THOUSAND NINE
6. Proof for Date of Birth submitted at the time of admission	: BIRTH CERTIFICATE	
7. Nationality : INDIAN	Religion: ISLAM	
8. Whether the candidate belongs to S.C./S.T./OBC	3-1- :	taria mana ari
9. Date of first admission in the School with Class	: 31-05-2015, CLASS I	
Class in which the pupil last studied (in figures and in words)	: CLASS VII (SEVENTH)	
 School/Board Annual examination last taken w result 	rith : SCHOOL, PASS	
12. Whether failed, if so once/twice in the same cl	ass : NO	
13. Subjects studied	: ENGLISH, HINDI, KANNADA, MATHEN SCIENCE	MATICS, SCIENCE, SOCIAL
Whether qualified for the promotion to higher class	: YES, CLASS VIII	
15. Month up to which the pupil has paid the scho dues	ol : MARCH 2022	
Any fee concession availed of if so, the nature such concession	of : NO	
17. Total No. of working days in the academic sess	sion : 213	
18. Total No. of working days pupil present in the school	: 198	
19. Whether NCC Cadet/Boy Scout/Girl Guide		
Games played or extra curricular activities in which the pupil usually took part	: FOOTBALL	
21. Whether school is under Govt./Minority/Independent Category	: MINORITY	
22. General Conduct	: GOOD	
23. Date of application for certificate	: 11-04-2022	
 Date on which pupil's name was struck off the rolls of the school 	: 12-04-2022	
25. Date of issue of certificate	: 12-04-2022	
26. Reason for leaving the school	: ON PARENTS REQUEST	
27. Any other remarks	: NO	

I hereby declare that the above information including Name of the Student, Father's Name, Mother's Name and Date of Birth furnished above is correct as per school records.

Date: 12-04-2022

Receiver's Signature with Date:

Name in full: SHAIXIRA BANU

NUMBER 830650

Signature of Principal

Principal

St. Aloysius Gonzaga School P.B. 720, Mangalore - 575 003