"Bhavani Campus" No. 6, Kilpauk Garden Road, Kilpauk, Chennai – 600 010.

Applicat	ion 1	for Tran	sfer Certi	ficate	Id No:
Name of the Child	:_				
Name of Father	:_				
Name of Mother	:_				
Class in which the child is presently studying	:_				
Class in which the child was admitted	:_				
Extra-Curricular Activities if any	:_				
Category to which he/she belongs	: B	C/MBC/S	SC/ST/OC *		
Reasons for leaving the School	:_				
Date of application of TC	:_				
Name and Address of the School to which the ward is to be admitted	:_				
*All fields are Mandatory					
Signature of the Father					Signature of the Mother
attach Photocopy of the community cert	ificat	e if applic	able.		
Signature of the Class Teacher	:				
Signature of the Librarian (Dues)	:		Yes / No		
Remarks by Accounts Department	:	Dues	Yes / No		
Remarks by Principal	:				
TC prepared by:				ETC No.	