



Arch Bishop Mar Theophilus Memorial Educational and Medical Foundation

Dr. Mar Theophilus School

(Affiliated to CISCE) - (School Code - MA 196/2016)

School Registration Number- 1008/678/3 dated 18/8/2009

Survey no 14/1, Dhanori Village, Dhanori, Pune-411015, Taluka - Haveli, District - Pune

Phone : 020-27029140, Mobile : 7720043214. E - mail : dr.mar.theophilus.school.tc@gmail.com

TRANSFER CERTIFICATE

Sr.No.: **484**

Date : **28/03/2022**

Medium : English

Board : ICSE Board

General Register No : **877**

U Dise No : 27251500424

Student Id : _____

UID No. : _____

Name of the Student (Name) : **DIVYA DHANRAJ RASAL**

Father's Name : **Mr. DHANRAJ RASAL**

Mother's Name : **Mrs. POONAM RASAL**

Nationality **INDIAN** Mother Tongue **MARATHI**

Religion **HINDU** Caste **MANG** Sub Caste _____

Place of Birth (Village/City) **PUNE** Taluka _____ District _____

State **MAHARASHTRA** Country **INDIA**

Date of Birth (in figures) **25.04.2010**

Date of Birth (in words) **Twenty fifth April Two Thousand Ten**

Last school Attended and Std **NEW ADMISSION**

Date of Admission **02.06.2015** Std **I**

Progress **GOOD** Conduct **GOOD**

Date of Leaving School **12.03.2022**

Class in which Studying at the time of Withdrawal (in words and figures)

VII - B (SEVENTH - B)

Reasons for Leaving School **PARENTS' WISH**

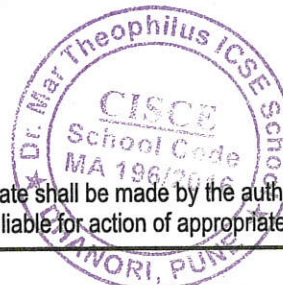
Remarks **PROMOTED TO STD VIII**

Certified that the above information is in accordance with the school General Register No. **877**

Date **02** Month **06** Year **2015**

Rishon
Class Teacher

Shubham
Clerk



R. George
Principal Seal and Sign

Mrs. Roshni George

Principal
Dr. Mar Theophilus School
Dhanori, Pune-14

Kindly Note : Changes in any entry in this certificate shall be made by the authority issuing it and any infringement of this requirement is liable for action of appropriate penalty