



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.: **359**

Date : **11.07.2020**

Medium : English

Board : ICSE Board

General Register No : **1102**

U Dis No : 27251500424

Student Id : **2016272515004240077**

UID No. : \_\_\_\_\_

Name of the Student (Name) : **AYUSH ANKUSH SHETE**

Father's Name : **Mr. ANKUSH SHETE**

Mother's Name : **Mrs. VARSHA SHETE**

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

Religion **HINDU** Caste **CHAMBHAR** Sub Caste **-**

Place of Birth (Village/City) **BHIWANDI** Taluka **-** District **THANE**

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

Date of Birth (in figures) **24.02.2010**

Date of Birth (in words) **Twenty fourth February Two Thousand Ten**

Last school Attended and Std **NEW ADMISSION**

Date of Admission **11.04.2016** Std **I**

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

Date of Leaving School **08.06.2020**

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

**IV - A (FOURTH - A)**

Reasons for Leaving School **PARENTS' WISH**

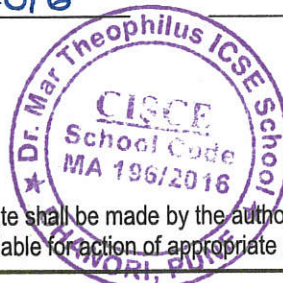
Remarks **PROMOTED TO STD V**

Certified that the above information is in accordance with the school General Register No. **1102**

Date **11** Month **04** Year **2016**

Class Teacher **[Signature]**

Clerk **[Signature]**



Principal Seal and Sign **[Signature]**

**Dr. Roshni George**

Principal  
**Dr. Mar Theophilus School**  
Dhanori, Pune-15

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.