

Signature of Class Teacher

ST. PAUL HIGHER SECONDARY SCHOOL

(Affiliated with CBSE, New Delhi, Affil. No.: 1030086) Boundary Road, Indore - 452 001 (M.P.)

Tel. No.: (0731) 2492292, 2492325 E-mail: stpaulhs@sancharnet.in

School Code: 03285

TRANSFER CERTIFICATE

Scho	lar No. : 10287	Book No.	28	T.C. No. :	4650
1.	Name of Pupil: JOEL PATRICK LEWIS				
2.	Mother's Name :	JENNIFER LEW	/IS		
3.	Father's / Guardian's Name :	JOHN FELIX LE	EWIS		
4.	Nationality :	Indian			
5.	Whether the Candidate belongs to	Schedule Caste / Sc	chedule Tribe :	GENERAL	
6.	Date of First Admission in the Scho	(02/07/2007	I 05/05/2001	
7.	Date of Birth (in Christian Era) acc (in words) FIVE MAY	TWO ZERO ZERO)	
8.	Class in which the pupil last studie	d (in figures) (in word	ds): CLASS X		
9.	School / Board Annual Examination	n last taken with resu	it: PASSED	COMPT. CLASS X (2017)	
10.	Whether failed, if so once / twice in	the same class:	NO		
11.	Subjects Studied : 1. ENGI 4. SCIEN		2. HINDI 5. SOCIA	I 3. M	ATHEMATICS
12.	Whether qualified for promotion to if so, to which class (in fig.):	the higher class:		(in words) :	
13.	Month upto which the School fees	paid:	MARCH	2017	
14.	Any fee concession availed of if so	, the nature of such o	concession:	N.A.	
15.	Total number of working days :	219	16. Total Nur	mber of working days present :	166
17.	Whether NCC Cadet / Boy Scout /	Girl Guide (details m	ay be given):		
18.	Games played or extra-curricular a (mention achievement level therein		il usually took part	N.A. GOOD	
19.	General Conduct :	GOOD			
20.	Date of application for Certificate :	09/06/2	018 21.	Date of issue of Certificate :	16/06/2018
22.	Reasons for leaving the School:	PARENT'S REQ	UEST		10/00/2010
23.	Any other remarks :	PASSED COMPT	. CLASS- X (JU	LY - 2017)	
	Certified that the above particulars are in accordance with the School Register.				
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(State full name & designation)
P. J. Thomas
(Head Clerk)

Principals's Signature with Seal Impression

St. Paul Higher Secondary School