

INDIA INTERNATIONAL SCHOOL Mangaf , Kuwait

Tel: 23728702, 23728724, Email iiskwt@hotmail.com APPLICATION FORM FOR TRANSFER CERTIFICATE

I.C. Application No		Date of Application:	
Name of the Student (in BLOCK LE	ETTERS)	:	
Admission Number		:	
Class & Section		:	
Gender		: BOY	GIRL
Nationality		:	
Date of Birth		:	
Date of Leaving School (Date of last C	Class attended)	:	
Reason For Leaving the School		He / She	e is leaving Kuwait.
Kindly put a (11) mark which is applicable		: He / She wants	s to continue in another school in Kuwait
Name of the country / School to be joined Nameof the Parent / Guardian		:	Nawaii
		:	
Signature of Parent / Guardian		:	
Contact number of the Parent / Gua	ardian	:	
	(For Office use	e only)	
Clearance from :-		Date of Application re	eceived ://
The Class Teacher		The Librarian	
Physics Lab		Chemistry Lab	
Biology Lab		Computer Lab	
Physical Education		VP/HM/Coordinator	
Remarks from VP/HM/Coordinator:			
Remarks from Accounts Department:			
		School Tra	ansfer Certificate can be issued,
Accounts/Admin.Department			
			Principal
	5%%%%%%	4-%-%-%-%-%-%	
IND)LA INTERNATIO MANGAF, KUV		
		iskwt@hotmail.com R CERTIFICATE APP	PLICATION
T.C. Application No		Date of Application:	
The application for T.C. of your ward Ma	ster/Miss		
of ClassSection			
Certificate will be prepared once all the of for obtaining the T.C. Clerk / Secretary	dues are cleared by	/ you. You have to pro	duce this acknowledgement
Clork / Gooletary			
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