# North Point Senior Secondary Boarding School

Arjunpur Branch, Kolkata - 700059
Affiliated to C.B.S.E., DELHI
Phone : 033-25594526 / 7605043338 / 7605043339
Web : http://www.npssbs.org.in, Email : npsarjunpur@npssbs.org.in

## TRANSFER CERTIFICATE

Affiliation No. **2430052** School Code **15680**
SI No. **973** Admission No. **13303**

| | | |
|---|---|---|
| 1 | Name of Pupil | **KRITI SARAF** |
| 2 | Mother Name | **RINA SARAF** |
| 3 | Father's/Guardian's Name | **RAJESH SARAF** |
| 4 | Date of birth (in Christian Era) according to Admission Register (in figures) | **19-02-2008** |
| | (in words) | **Nineteen February Two Thousand Eight** |
| 5 | Nationality | **INDIAN** |
| 6 | Whether the candidate belongs to Schedule caste or Schedule Tribes or O.B.C. | **General** |
| 7 | Date of first admission in the School with class | **20-06-2024** Class Joined **XI SCIENCE** |
| 8 | Class in which the pupil last studied/studying | (in figures) **XII SCIENCE** (in words) **TWELVE** |
| 9 | School/Board Annual Examination last taken with result | **PASS** |
| 10 | Whether failed, if so once/twice in the same class | **NO** |
| 11 | Subject Studied | **English, Physics, Chemistry, Mathematics, Physical Education** |
| 12 | Whether qualified for promotion to the higher class if so,to which class (in fig. & in words) | **YES ()** |
| 13 | Month upto which the (pupil has paid) school dues paid | **MARCH 2026** |
| 14 | Any fee concession availed of : if so, the nature of such concession | **NO** |
| 15 | Whether NCC Cadet/ Boy Scout / Girl Guide (details may be given) | **NO** |
| 16 | Games played or extra curricular activities in which pupil usually took part (mention achievement level therein) | **-** |
| 17 | General conduct | **GOOD** |
| 18 | Date of application for certificate | **23-06-2026** |
| 19 | Date of issue of certificate | **24-06-2026** |
| 20 | Reasons for leaving the school | **PASSED CLASS XII** |
| 21 | Any other remarks | **-** |

for Ghosh
**Signature of Class Teacher**

Debi Prasad Ghosh
**Checked By**
**(With full Name and Designation)**
(Admin)

Saha
**Signature of Principal**
**(With Date and School seal)**