

**Phone No. :** 0712 6636114, 8888822683 | **E-mail :** info@theachieversschool.com | **Sr. No.:** .....

**General Reg. No.:** ..... | **School Recognition No.:** 10187/11 | **Medium :** English

**U-Dias No. :** 27090914203 | **Board :** CBSE | **Affiliation No. :** 1130677

## SCHOOL LEAVING CERTIFICATE

Student I.D.

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U.I.D.No. (Adhar Card No.)

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Full name of the student : .....

(First Name)

(Middle Name)

(Last Name)

Mother's Name : .....

Nationality : ..... Mothertongue : .....

Religion : ..... Cast : ..... Subcast : .....

Birth place (Town/City) : ..... Taluka : ..... District : .....

State : ..... Country : .....

Date of Birth : ..... Date of Birth in words : .....

Previous School : ..... Class : .....

Date of admission in this school : ..... Class : .....

Academic Progress : ..... Conduct : ..... Date of leaving the school .....

In which class studying and since when (In words and figure) : .....

Reason for Leaving the school : .....

Remarks : .....

Certificate is issued according to the information given is General Register No.1

.....  
Class Teacher

.....  
Writer

.....  
Headmaster / Principal  
(Sign with stamp)

*Note : Legal action will be taken if unauthorised changes are made in this school leaving certificate.*