KENDRIYA VIDYALAYA SANGATHAN, KOLKATA REGION

Application for Local transfer for the year 2019-20 (To be submitted in Triplicate in the KV where the student is presently studying)

Transfer sought from KV	to KV
2. Name of Student (Capital letter)	<u>:</u>
3. Sex	:
4. Father's name	į
5. Class in which the child is studying:	
6. Reason for seeking transfer	:
(Enclose the documentary evidence. Medi Medical documents issued by the Govt. He 1. (a) Residential address at the time of a	cal ground cases should be supported by valid ospital/AMA/CGHS.
(b) Present residential address *:	
(Residential proof of a & b both are to (*Attach any one : Xerox copy of Gas cor Card/Allotment of Quarter in case of Govt	nnection, Ration Card, Voter I.D. Card/ Aadhaar
7. Signature of the parent/guardian with o	date:
	(V where the student is studying) to be sent the KV where local transfer is sought)
1. From which year the child is studying i	n your KV :
2. Whether the child admitted on transfer	or fresh admission :On Transferred / As fresh.
3. Category of the parent (must be fill	(tick proper place) ed up) :
4. Roll strength of class. : N	No. of sections Strength
5. Remarks/recommendation of the Princi	pal :
	Signature of Principal With seal
	KV where local transfer sought) es, one copy is to be sent to RO)enrolment
2. Remarks/Recommended/Not recommer	nded of the Principal :
	Signature of the Principal with seal
Approved/Not approved. (to be filled up by	