

# **SCHOOL LEAVING CERTIFICATE**

( Academic Year: XXXX-XXXX )

File No. ....

Date of issue .....

Pupil's Name **Ms.** .....

Date of Birth .....

Student Registration No. (SRN) .....

No. in Admission Register .....

Name of Father/Guardian **Mr.** .....

Mother **Mrs.** .....

Certified that ..... attended this school up-to ..... He/she has paid all sums due to the school, and was allowed on the above date to withdraw his/her name. He/she was reading in Class ..... in this school.

1. He/she was examined in ..... and

- ☐ a. Was allowed/promised promotion to Class , .....
- ☐ b. Passed the examination in the highest class available in the school, OR
- ☐ c. Left the school mid-session to join a different school, OR
- ☐ d. Failed in ..... subject(s)

*Note: (please tick and fill whichever is applicable)*

The following particulars are certified to be correct according to the registers of the school and the certificate's produced from previous school attended during the school year:

No	School	Date of Admission	Date of withdrawal	Date of attendance during the current school year	No. of total attendances during the current school year	Pupil's attendance during the current school Year	Leaves taken during the current school year
1	SANT NISCHAL SINGH P/S LADWA				0	0	0

Date of issue **xx-xx-xxxx**

Signature and seal of Head Institution