**KENDRIYA VIDYALAYA SANGATHAN, AGRA REGION**

**LOCAL TRANSFER APPLICATION 2019-2020**

PART A (To be filled by Parent/Guardian)

|  |  |
| --- | --- |
| 1 | Name of the present K.V.: Shift: |
| 2 | Name of the Student |  |
| 3 | Class (with stream applicable for XI & XII) |  |
| 4 | Date of initial Admission with Admission No. |  |
| 5 | Father's Name/Mother's Name |  |
| 6 | Parent's Department (Central/State/Any Other) Category |  |
| 7 | Address as recorded in the Vidyalaya at the time of initial admission (copy of the proof may be attached) |  |
| 8 | **Reason for seeking Transfer** |
| **Please tick ( √ ) on relevant reason:-**(a) Allotment/Vacation of Govt. Accommodation(b) Parents' transfer (Cat. I to IV only)(c) Shifting to/purchase of own house.(d) Sibling Case(e) Serious Medical case(f) Any other reason (as deemed fit by the Principal, including shifting to rented accommodation, subject to availability of vacant seats.**(Please submit the valid proof in support of your reason for Local Transfer (a) to (f) ).** | ( )( )( )( )( )( )Document submitted :-(i)(ii) |

Certify that the above information is correct to the best of my knowledge and if at any stage the information submitted is found to be wrong /incorrect I shall forfeit my claim for Local Transfer of my Ward.

 (SIGNATURE OF THE PARENTS)

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Verified/Not verified

Signature & Name of the Class Teacher with date:

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Certified that the above case is forwarded after verifying the details and relevant papers for seeking local transfer submitted by the parent and duly verified by the Class Teacher.

 (SIGNATURE WITH SEAL)

 **PRINCIPAL**

 (Present KV where student is studying)

**PART B (To be filled by KV where transfer is sought)**

**Name of KV :-**

To be filled by the Admission In-charge:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| S. No. | Name of Student | Name of KV (Prev.) | Class | Shift - 1 | Shift - 2 |
| No. of Sections | Total Class Strength | Average enrolment  | No. of Sections | Total Class Strength | Average enrolment  |
| 1 |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |

 In case the transfer is sought on **Sibling Case,** the following details may be verified :-

Name and Admission No. of Brother/Sister :

Studying in class/section/ (with stream) :

Verified/Not verified:

Signature of Class Teacher:

Name of Class Teacher:

 (SIGNATURE WITH SEAL)

 **PRINCIPAL**

 (Present KV where transfer is sought)