



Bloom Public School

C/8, Vasant Kunj, New Delhi-70
Tel. No. : 9310709248, 8826283167

Email: information@bloompublicschool.org, website: www.bloompublicschool.org
School ID:1720169, CBSE Affiliation No. 2730268

APPLICATION FOR WITHDRAWAL AND ISSUE OF TRANSFER CERTIFICATE

I, the undersigned, hereby request the withdrawal of my ward from the school and the issuance of a Transfer Certificate (TC).

Student Details

Student's Name: _____, Class & Section: _____

Admission No.: _____, School Dues Cleared Up To: _____

Reason for Withdrawal *(Please tick ✓ the appropriate option)*

Shifted to a school in Delhi

Area / Locality of the new school: _____

Shifted to a school in another State

State: _____

Shifted to a school in another Country

Country: _____

Withdrawal requested with effect from: _____

Declaration

I hereby confirm that all information provided above is true and correct to the best of my knowledge. I understand that the Transfer Certificate will be issued subject to clearance of all dues and completion of the school's withdrawal formalities.

Parent/Guardian Signature: _____

Name: _____

Date: _____

For School Use Only

Class Teacher Name: _____ Signature: _____

School Dues Cleared: Yes No Signature of Fee Incharge _____

Library Clearance: Yes No Signature of Library Incharge _____