



INDIAN SCHOOL AL-AIN

Tel No: 03 7678915
P.O Box 16062 – AL-AIN
www.indianschoolalain.com

REOUEST FOR TRANSFER CERTIFICATE

Academic Year: _____

Adm No: _____ Parent Code No: _____

Mobile No: _____

If Using School Transport Yes /No

If yes, please mention Bus No: _____

To
The Principal
Indian School Al-Ain
Dear Madam

Kindly issue me the Transfer Certificate for my son /daughter _____
of Class _____ Nationality: _____ Religion: _____

I am transferring my ward from your school to

- _____ in Al-Ain, Abu Dhabi Zone
- _____ Emirate of U.A.E
- Name of the Country _____

Last date of attendance: _____

Reason for Leaving: _____

Yours faithfully,

Name & Signature of the Parent _____ Date : _____

FOR OFFICE USE

Departmental Clearance	Remarks	Signature & Date
Accounts :	Fee paid till _____ Receipt No: _____ Date: _____	
Class Teacher :	Date of last attendance : _____ Total attendance out _____ / _____	
Section Heads		
Library (Class III & Above)	Returned / Due	
Transport Section		
Registrar	eSIS No:	
Principal		

Received the original TC Name & Signature; _____ Date : _____