



D. A. V. PUBLIC SCHOOL

H. F. C. URVARAK NAGAR, BARAUNI-851115

Application for Withdrawal

Date.....

Admission No. _____

Fee Card L. F. No. _____

1. Name of Student (Block letter) : _____
2. Date of Birth : _____
3. Father's Name (Block letter) : _____
4. Mother's Name (Block letter) : _____
5. Address Local : _____
6. Permanent Address : _____
7. Class/Sec : _____
8. Cause of Withdrawal : _____
9. Caste : _____
10. Date of first Admission : _____ in Class _____
in school

FOR OFFICE USE
T.C. No
Date

I hereby certify that above statement is correct.

Parent/ Guardian's Signature

Class Teacher to realise	No. dues clearance
Roll No. Date of removal	Dues Paid upto :
1. Date of Promotion :	<i>Acctt.</i>
2. School attended upto :	1. Certified that all the books lent to the student have been duly returned to the library.
3. Fee concession if any :	<i>Librarian</i>
4. Total working days of school :	2. Certified that all the articles lent to the student have been duly returned.
5. No. of days the Pupil attended :	<i>Chem I/C</i> <i>Craft I/C</i>
Class teacher	<i>Games I/C</i> <i>N.C.C. Incharge</i>
.....	<i>Bio I/C</i> <i>Phy I/C</i>
.....	Principal