

Kendriya Vidyalaya Sangathan: Regional Office, Silchar
Application form for Local Transfer year 2024-25

(To be submitted in Triplicate)

Date

01	Name of the present school	
02	Name of the school where transfer is required	
03	Name of the Student	
04	Name of the Parents	
05	Class	
06	Department where the parents is working. (Give proof)	
07	If there is reason for change of residence, provide proof:-	
(a)	Date of allotment of Government accommodation (Attached certificate)	
(b)	Date of entry into newly constructed or purchased accommodation (Give proof)	
(c)	Distance of residence from present school	
(d)	Distance of residence from desired school	
08	Real brothers/sisters if studying in different KVs. then complete details of the student (attach the certificate):-	
(a)	Name of Student	Name of KV
(b)	Name of Student (Brother/Sister)	Name of KV
09	If there is a medical reason. (Give certificate)	
10	Other reason	

Signature of the parents (Father/Mother)

To be filled by the Principal of Present KV:-

(After filling 03 copies, 02 copies are to be sent to KV where local transfer is sought)

01	Average number of students in the class	
02	Category of the parents at the time of Admission (i.e. I, II, III, IV, V & VI)	
03	Date of admission in present school	
04	If transferred from KV, then the name of the previous school	
05	School attendance in this year	
06	Local Address at the time of admission:- (Attach photocopy of application)	
07	Remarks of Principal's (Recommended/Not recommended)	

It is certified that the above mentioned information is true as per records available.

Signature of the present Principal

To be filled by the school to which the student seeks local transfer.

(After filling of 02 copies 01 copy is to be sent to RO)

01	Average Enrolment in the respective class of the school for which transfer is desired)	
02	Remarks of the Principal Recommended / Not Recommended	

Signature of Principal

Ch