



NEO DALES MONTESSORI SCHOOL  
Sector 16, New Moradabad - 244102  
Phone: 8755783306

### APPLICATION FOR WITHDRAWAL

1. Date of application.....S.R. Number.....
2. Name of the child.....
3. Class in which admission took place.....
4. Class in which last studied.....
5. Parents/Guardian's name and full address.....  
.....
6. Date of joining the school.....
7. School where joining.....
8. Cause of withdrawing.....
9. Whether all dues paid.....

Certified that the above facts are true and correct to the best of my knowledge. The transfer certificate may kindly be issued.

Parent's/ Guardian's Signature

Date.....

There is no objection to the issue of the certificate. All dues upto date have been paid. Please issue T.C.

.....  
Principal

Date.....

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#### For office use only

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T.C. Prepared.....(yes/no)      T.C. No. ....

Print Taken..... (yes/no)      Handed over.....(yes/no)

B.C. Received.....(yes/no)      Dues paid till.....