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SCHOOL LEAVING CERTIFICATE

Book No	S. No 1	Admission No
01. Name of Pupil		<u></u>
Mhether the candidate belongs	to Schedule Caste or Schedule Tri	be
Date of Birth (in Christian Era) a		
		.(in words)
39. Whether failed, if so once/twice it	in the same class	
		6
		lass (in fig.)
(in words)		
Wonth upto which the (Pupil has	paid) School dues	
		1
14 Total No of working days		
15 Total No. of working days preser	nt	
Game played or extra curriculer		
20 Date of issue of certificate		
21 Reasons for leaving the School		
22 Any other remarks		

Signature of Class Teacher

Checked by (State full name and designation)

Principal Seal

Countersigned