**APPLICATION FOR TRANSFER CERTIFICATE**

**From Date: …………………**

*……………………………………………….. (Parent Name)*

*…………………………………………………(Address)*

*…………………………………………………*

*………………………………………………… (Phone Number)*

**To**

The Principal

Wisdom Public School

Kayalpattinam Main Road

Veerapandianpattinam - 628216

**Sub:** Application for Student Transfer Certificate

Respected Sir / Madam,

I hereby request you to kindly issue a transfer certificate for my son/daughter ....................................................................................................................... of Class ............. and Admission Number ................. ,since ……………………………………………………………………....……. *(Explain the whole issue to the concerned authority in brief)*

I like to thank you and your staff for their kind cooperation and support to our child in the past.

Thank You,

Yours Faithfully

*(parent’s signature and name)*