

KENDRIYA VIDYALAYA SANGATHAN: HYDERABAD REGION
APPLICATION FOR LOCAL TRANSFER 2020-21

1. Name of the student : _____

2. Class : _____

3. Name of the KV where studying : Kendriya Vidyalaya _____

4. Mention the Class & year from which the student is studying in the present Vidyalaya

(give details) : Class: _____ Year: _____

) In which class the child was admitted in the present KV: Class: _____

) Date of admission in the present KV : DD ____ / MM ____ / Year ____

) Total period of study in the present KV: _____

5. Name of KV to which local transfer is sought: Kendriya Vidyalaya: _____

6. Details of parents:

) Father's Name : : Sri _____

) Occupation of father : _____

) Office Address : _____

: _____

) Mother's Name : Smt _____

) Occupation of mother : _____

) Office Address : _____

: _____

) Present Residential address: _____

7. Reason for seeking local transfer with documentary evidence (Documents to be attached)

Date:

Signature of the parent with Name &
Mobile No.:

Recommendation of the Principal where the student is currently studying:

Signature of the Principal

Date:

RECOMMENDATION OF THE COMMITTEE

RECOMMENDED/NOT RECOMMENDED

Date:

Signature of DC/AC