



المدرسة الهندية مسقط INDIAN SCHOOL MUSCAT

(Affiliated to the Central Board of Secondary Education, New Delhi. Affiliation No. 6130001)

ص.ب: ٢٤٧٠، روي، الرمز البريدي: ١١٢، سلطنة عمان، هاتف: ٢٤٧٨٤٠٩٧، ٢٤٧٨٤٠٦٩، ٢٤٧٨٤٠٥٥، ٢٤٧٠٢٥٦٧، فاكس: ٢٤٧٩٤٩١٩
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ISM/PRN/260/2023-24

March 03, 2024

CIRCULAR TO PARENTS OF THE SCHOOL (KG I to STD XI) (TC Application for the year 2023-24)

Dear Parent,

Greetings from Indian School Muscat!

Sub: Application for the Transfer Certificate (2023-24)

Parents who would like to apply for Transfer Certificate for their wards after the current academic year (2023-24) should submit the TC application in the prescribed form to the School office on or before **Sunday, 10th March 2024**. **Please provide the resident card copy of the parent also along with the TC application in order to process the refundable deposit.**

The prescribed TC application form is attached along with this circular or can be collected from the admission office between 7.30 a.m. and 2.30 p.m.

Please note that any further delay in submitting the TC application will result into delay in issuing the TC on time after the declaration of the results. In such cases, the TC will be issued as per the guidelines mentioned in the school diary.

The new academic year Tuition Fee will be applicable as per the TC date for those TC applications received after 31st March 2024.

Those who have already submitted the application, *kindly ignore this circular.*

Kind regards

Rakesh Joshi
Principal



INDIAN SCHOOL MUSCAT

☎: 24702567 / 24707567

From : _____

Tel : (O) _____ (R) _____

To : **The Principal**
Indian School Muscat
Sultanate of Oman

Dear Sir,

Sub : Application for Transfer Certificate :

I wish to withdraw my son / daughter from the School with effect from _____.

The reason for the withdrawal is _____.

Name of the Student _____ Class _____ Sec. _____

It is therefore requested that a Transfer Certificate be issued to my ward and refundable deposit of R.O. _____ be returned to me. It is understood that the refundable deposit will take approximately 10 days from the date of this application.

Class Teacher's Name : _____ G.R. No. _____

Thanking you,

Parent's Name : _____ Signature : _____ Date : _____

Please furnish the following details also :

If any other child/children of yours is/are studying in the school.

#	Name of Student	G.R. No.	Class & Sec.
1			
2			
3			

FOR OFFICE USE ONLY

(a) Clearance from the Lab. I/C
CHEM. PHY. BIO. COMP.
SC.

(b) Clearance from the Librarian : _____

(c) Class Teacher's remarks on Attendance : From : _____ To : _____ No. of days = _____

(d) Last Date of Attendance : _____

Class Teacher's remarks about the progress in studies : _____
(Please keep the REPORT CARD / MARKS CARD ready)

Name of the Class Teacher : _____ Signature : _____ Date : _____

REFUNDABLE DEPOSIT DETAILS (For Accounts Dept.)		
Amount (R.O.) _____	Receipt No. _____	Receipt Date : _____