		GATHAN, KOLKATA REGION ofer for the session 2025-26
	(To be submitted by the parents in Triplicate in	the KV where the student is presently studying)
1.	Transfer sought from KV	to KV
2.	Name of the Student (Capital letter)	
2.		:
3.	Sex	:
4.	Father's Name	:
5.	Class in which the child is studying (2024-25)	:
6.	Reason for seeking transfer*	:
7.	Residential address at the time of admission**	
8.	Present residential address**	:
9.	Signature of the parent/guardian with date	:
	pse the documentary evidence; Medical ground cases should b al/AMA/CGHS)	be supported by valid Medical documents issued by the Govt.
	ch any one: Photocopy of Gas connection, Ration Card, Voter odation, Driving license as a proof of residence)	I.D. card, Aadhar Card, Allotment of Quarter in case of Govt.
	. 2	e student is presently studying) e sent to the KV where local transfer is sought)
1.	From which session the child is studying in the KV	:
2.	Whether the child was admitted on transfer or on fresh admit	
3.	Category of the parent (as per school record)	:
4.	Remarks/Recommendations of the Principal	:
	(To be filled by the KV whe	Signature of the Principal with Seal re local transfer is sought)
		py is to be sent to KVS RO Kolkata)
1.	Enrolment as on date in the Class in which transfer is sought : No. of sections:	
2.	Remarks/Recommended/Not Recommended of the Pr	rincipal :
		Signature of the Principal with Seal