

be issued
uplicate

File No. 154.....

Dated.....

Academic Heights Public School, Hoshiarpur..... Recognised
 Unrecognised
 District
 CBSE AFFILIATION No. - 1631286

LEAVING CERTIFICATE

Pupil's Name Lovedeep..... No. in Admission Register 128
 Father's Name Mr. Jaswinder Singh..... Mother's Name Mrs. Satinder Kaur

Agri/Non-Agri/Zimindar..... Date of Birth 26.04.2009
 S/o/ D/o Mr. Jaswinder Singh

CERTIFIED that Lovedeep.....
 attended school upto the 7th..... has paid all sums due to the school and was allowed on
 the above date to withdraw his/her name. He/She was reading in the 7th..... class
 of the..... Department, and PASSED/FAILED in the Examination for
 promotion to the 8th..... class.

The following particulars are certified to be correct according to the registers of this school
 and certificates produced from previous schools attended during the school year.....

School	Date of admission	Date of withdrawal	Period of attendance during the current School Year		Possible attendance during the current School Year	Actual attendance during the current School Year	Leave taken during the current School Year
			From	To			
(a) This School	03.04.2015	21.03.2022	April 21	Aug 21	N/A	Due to	COVID
(b) This Class			Sept 21	Dec 21	94	70	24
(c) This deptt.			Jan 22		N/A	Due to	COVID
			Feb 22	March 22	16	16	*
TOTAL							

Principal/ Headmaster/ Headmistress
 Academic Heights Public School
 Hoshiarpur

FOR SCHOLARSHIP HOLDERS ONLY

Kindy of scholarship..... Value.....
 Year of award..... Date upto which drawn.....
 By whom payable..... Leave taken at each school. 1.....
 2.....
 3.....