FORM OF APPLICATION FOR SCHOOL LEAVING CERTIFICATE

| | Date |
|---|---|
| То | |
| The Principal | |
| | |
| | |
| | |
| Dear Madam, | |
| Please furnish me with the Sch child/ward. The necessary particula | nool Leaving Certificate of my ars are given below: |
| Admn. No. | |
| Name | |
| Standard in which Studying | |
| Date of leaving school | |
| Reason of leaving school | |
| Address | |
| | |
| *************************************** | |
| Signature of Mother/Guardian | Signature of Father/Guardian |