

WITHDRAWAL FORM

	Date:		
Village Off Del	School		
Dear M	ladam,		
My Wa	rd Miss/ Master	Admission No	is studying
in class	s at your school.		
a.	I would like to withdraw him/her from Kasiga School due (reason)		
b. c. d. e.	I understand that I have to clear all dues of the School before collecting him/her from the School. I request you to issue him/her Transfer Certificate after I have cleared his/her dues. I will come to School to pick up my ward and all his/her belongings on (Date). I understand if all his/her belongings are not collected within fifteen days of his/her departure, the School has the right to discard his/her belonging possessions. Thanking You, Yours faithfully,		
	(Parents/Legal Guardian's Signature)		
	Name:		
	Address:	-	
	Telephone:	-	
	Mobile Number:	-	
	For Office Use Only : Date of Receiving Withdrawal for	m at school	

Address: Village Purkul, Off Dehradun Mussoorie Diversion Highway, Dehradun-248009, Uttarakhand Tel.: 0135-3090100 E. Mail: <u>principal@kasigaschool.com</u> Website: <u>www.kasigaschool.com</u>