

<p>केन्द्रीय विद्यालय संगठन (मानव संसाधन विकास मंत्रालय, भारत सरकार) संभागीय कार्यालय, कोलकाता ई०बी० ब्लॉक, सेक्टर-1, लाबोनी, साल्ट लेक कोलकाता - 700064</p>		<p>KENDRIYA VIDYALAYA SANGATHAN (Ministry of HRD, Govt. of India) REGIONAL OFFICE, KOLKATA EB Block, Sector-I, Laboni, Salt Lake, Kolkata-700064</p>
<p>ई-मेल: kvskolkata@yahoo.co.in वेबसाइट: www.kvsrokkolkata.org.in</p>	<p>☎ (033) 23376998(DC)/ 23219490(ACs)/ 23596099(AO/FO) ☎(033) 23379335</p>	

फ.25331/01/15-16/के.वि.एस. (शैक्षिक) /

दिनांक : 16.04.2019

E-MAIL ONLY

To
The Principal,
All KVs,
Under Kolkata Region.

Sub : Admission on Local Transfer for the year 2019-20

Madam/Sir,

With reference to the subject cited above, this to inform you that permission for local transfer will be granted by this office on merit basis. I am to enclose herewith the Local Transfer Format for your information. The Local transfer format may be uploaded in your Website **by 20th April, 2019**. The said information may also be displayed in the entrance gate as well as in notice board. 3 copies of Local transfer format may be collected from the parents from **26th April, 2019** along with supporting documents by the KV where the child is studying.

After filling up all the points, Principal (where the child is studying) shall send two copies along with all documents to the concerned Principal (where student wants to get local transfer) **forthwith**. Principal of the Vidyalaya, where local transfer is sought, shall forward one copy along with all supporting documents to KVS RO, **on or before 09.05.2019** with his remarks i.e. **recommended/not recommended** or **any other remarks**. Application should not be sent through the Parent.

This issues with the approval of the competent authority.

Yours faithfully,


(T. Brahmanandam)
Assistant Commissioner

Encl : as above.

P. T. O.

KENDRIYA VIDYALAYA SANGATHAN, KOLKATA REGION

Application for Local transfer for the year 2019-20
(To be submitted in Triplicate in the KV where the student is presently studying)

1. Transfer sought from KV_____ to KV_____
2. Name of Student (Capital letter) :
3. Sex :
4. Father's name :
5. Class in which the child is studying:
6. Reason for seeking transfer :

(Enclose the documentary evidence. Medical ground cases should be supported by valid Medical documents issued by the Govt. Hospital/AMA/CGHS.

1. (a) Residential address at the time of admission * :

(b) Present residential address * :

(Residential proof of **a & b both are to be attached**)

(*Attach any one : Xerox copy of Gas connection, Ration Card, Voter I.D. Card/ Aadhaar Card/Allotment of Quarter in case of Govt. accommodation, Driving license)

7. Signature of the parent/guardian with date :

(To be filled up by the KV where the student is studying)

(After filling three copies, two copies are to be sent the KV where local transfer is sought)

1. From which year the child is studying in your KV :
2. Whether the child admitted on transfer or fresh admission : On Transferred / As fresh.
(tick proper place)
3. **Category of the parent (must be filled up) :**
4. Roll strength of class. : No. of sections_____ Strength _____
5. Remarks/recommendation of the Principal :

Signature of Principal
With seal

(To be filled up by the KV where local transfer sought)
(After filling up two copies, one copy is to be sent to RO)

1. Enrolment as on date : No. of section_____enrolment_____
2. Remarks/Recommended/Not recommended of the Principal :

Signature of the Principal
with seal

Approved/Not approved. (to be filled up by RO)