

Certificate for Average Attendance of Children
[Under Rule 6.B. (b)]

Transfer Application No. _____ Treasury ID No. _____

Name of the Teacher: _____

UDISE Code: _____ Name of the School _____

Name of the Mandal: _____ Phone No. _____

Year	No. Of Children	Total Attendance	Working Days	% of Attendance
2013-14				
2014-15				

No. of Points he / she is eligible for _____.

Certify that the particulars furnished above are verified with the available records and are found correct. If any information is found incorrect by the authorities I am liable for disciplinary action in addition to prosecution, initiated by the authorities.

Signature of the Dy EO/ MEO / Headmaster