

**KENDRIYA VIDYALAYA SANGATHAN, KOLKATA REGION**

**Application for Local Transfer for the session 2024-25**

**(To be submitted by the parents in Triplicate in the KV where the student is presently studying)**

1. Transfer sought from KV ..... to KV .....
2. Name of the Student (Capital letter) : .....
3. Sex : .....
4. Father's Name : .....
5. Class in which the child is studying (2024-25) : .....
6. Reason for seeking transfer\* : .....
7. Residential address at the time of admission\*\* : .....
8. Present residential address\*\* : .....
9. Signature of the parent/guardian with date : .....

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

*\*\* (Attach any one: Photocopy of Gas connection, Ration Card, Voter I.D. card, Aadhar Card, Allotment of Quarter in case of Govt. accomodation, Driving license as a proof of residence)*

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

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

1. From which session the child is studying in the KV : .....
2. Whether the child was admitted on transfer or on fresh admission: ON TRANSFER / AS FRESH (Tick appropriately)
3. Category of the parent (as per school record) : .....
4. Remarks/Recommendations of the Principal : .....

Signature of the Principal with Seal

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**(To be filled by the KV where local transfer is sought)**

**(After filling up two copies, one copy is to be sent to KVS RO Kolkata)**

1. Enrolment as on date in the Class in which transfer is sought : ..... No. of sections: .....
2. Remarks/Recommended/Not Recommended of the Principal : .....

Signature of the Principal with Seal

**(To be sent to KVS RO Kolkata along with all documents)**

## **STUDENT DETAILS FOR LOCAL TRANSFER**

Name of the Student:

Date of Birth:

Admission Number:

Class & Section:

Admission Date in Present KV:

Father's Name;

Mother's Name:

Category:

Department of the Father/Mother:

Child admitted to this KV on : Transfer Ground / Fresh Admission  
( tick ✓ whichever is applicable.)

Signature of the Parent

## **CERTIFICATE FROM CLASS TEACHER**

It is certified that the details mentioned by the parent in the Local Transfer form were found to be correct as per the admission register.

Signature of Class Teacher:

Name of the Class Teacher: