



S.S.P Shikshan Sanstha's

*S.S.P. Shikshan Sanstha's*

# Ganesh International School

## Withdrawal Application for Students

**Date:**

Name of the Student:- \_\_\_\_\_

Class & Division: \_\_\_\_\_

G.R.No/Registration No:- \_\_\_\_\_

Name of the Parent Guardian: \_\_\_\_\_

Contact No: \_\_\_\_\_

Respected Madam /Sir,

I would like my child \_\_\_\_\_ studying in STD \_\_\_\_\_ to  
discontinue attending the school due to the following reason/s.

---

---

---

Kindly do the needful at the earliest and hand over the leaving certificate and other relevant documents.

Thanking you.

Name & Signature

GANESH INTERNATIONAL SCHOOL

NO DUES CERTIFICATE

---

DETAILS OF DUES

Department	( √ / × )	Remarks	Sign
1. Accounts/Fees	<input type="checkbox"/>		
2. Library	<input type="checkbox"/>		
3. Computer Lab	<input type="checkbox"/>		
4. Science Lab	<input type="checkbox"/>		
5. Sports/Activity	<input type="checkbox"/>		
6. Class Teacher	<input type="checkbox"/>		
7. Examination/CCE	<input type="checkbox"/>		
8. Books/Stationery	<input type="checkbox"/>		
9. Uniform	<input type="checkbox"/>		
10. Principal	<input type="checkbox"/>		

---

\_\_\_\_\_ has got/not got clearance from all the departments.

Remarks: \_\_\_\_\_

Vice-Principal

Principal

Administrator.

