

10. Name of Student at 9 (i) above _____

(a) School to which transferred _____ **OR**

(b) Last date of attendance of student _____

11. Principal's Comments/ Recommendations _____

Principal's signature

Date

PLACE STAMP HERE

C. TO BE COMPLETED BY PRINCIPAL OF CURRENT SCHOOL

1. Name of Pupil _____

First

Middle

Surname

2. Date of Birth / /
dd mm yy

3. Present Form/Class of Pupil _____

4. Date of entry at school / /
dd mm yy

5.

	Previous Primary School	Class	Date Entered	Date Left	Reason for Leaving
1					
2					

Number of attendances made during the current academic year in this school

Period of attendance in this school – From 20

to 20

Conduct

Remarks

.....

Signature and Stamp of Current Principal:

Affix Principal's stamp here

D. TO BE COMPLETED BY THE SCHOOL SUPERVISOR OF CURRENT SCHOOL

School Supervisor's Comments/ Action Taken:

School Supervisor's Signature

Date

PLACE STAMP HERE

E. TO BE COMPLETED BY THE SCHOOL SUPERVISOR OF RECEIVING SCHOOL

I hereby acknowledge receipt of the completed Transfer Form

Signature of Supervisor

Date

PLACE STAMP HERE