



BOARD OF OPEN SCHOOLING & SKILL EDUCATION

Established by the Government of Sikkim Under Act No. 14 of 2020

APPLICATION FOR ISSUE OF MIGRATION CUM TRANSFER CERTIFICATE

(KINDLY FILL IN BLOCK LETTERS)

Name of the Student: _____

Father's Name: _____

Registration No.: _____

Secondary/Higher Secondary: _____

Month & Year of Last Appearance: _____

Session: _____

Whether Passed or Failed: _____

_____ Pin Code: _____ Phone No.: _____

E-mail ID: _____ Mobile No. _____

Date: _____

Place: _____

(Signature of Student)

The above particulars given by the applicant are verified and found correct.

FEE: Rs. 400/- (Each) Mode of Payment Cash DD/Cheque

(DD to be in favour of BOSSE)

Bank: _____ Amount(Rs.) _____ DD No.: _____ Date: _____

For Office Use

Request received on: _____ Certificate No.: _____

Marksheet Issued on: _____ Authorised Signatory: _____

Enclosure (All Documents should be self attested)

- Copy of Marksheet.
- Copy of ID Card