



# CHIJ Our Lady of Good Counsel

Established 1960

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## CCA Transfer Form

Name : \_\_\_\_\_ (Index No)

B/C No : \_\_\_\_\_

Class : \_\_\_\_\_

Date of Request : \_\_\_\_\_

<b>Current CCA:</b>	<b>Name of Teacher:</b>	<b>Teacher's Signature:</b>
<b>New CCA Option:</b>		

(Please attach parent's letter along with this Withdrawal/Transfer form)

Parent's Name : \_\_\_\_\_

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

Parent's Signature : \_\_\_\_\_

### OFFICIAL USE

The CCA which the student is assigned to is

Signature of HOD: \_\_\_\_\_ Date: \_\_\_\_\_

### ACKNOWLEDGEMENT SLIP

(To be filled by AE)

Name: \_\_\_\_\_ Class: \_\_\_\_\_

Your transfer request to ( *Name of CCA* ) is \*Approved / Rejected.

Acknowledged by: \_\_\_\_\_ Date: \_\_\_\_\_