

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]

The Principal

[School Name]
[School Address]
[City, State, Zip Code]

Subject: Application for School Leaving Certificate

Dear [Principal's Name],

I am writing to request the issuance of my School Leaving Certificate. I am a student of [Class/Grade] at [School Name], and my details are as follows:

- Name: [Your Full Name]
- Roll Number: [Your Roll Number]
- Admission Number: [Your Admission Number]
- Date of Birth: [Your Date of Birth]

Due to [mention your reason, e.g., relocation, transfer to another school], I have decided to discontinue my studies at [School Name]. I kindly request you to process my application and provide me with the School Leaving Certificate at your earliest convenience.

I appreciate your assistance and understanding in this matter.

Thank you.

Sincerely,

[Your Signature] (if sending a hard copy)

[Your Name]