

# BETHANY NAVAJEEVAN INSTITUTIONS

Bethany Nagar, Vencode, Kanniakumari – 629171

## TC REQUEST FORM

- **Name of the Student (in Tamil) :** \_\_\_\_\_
- **Name of the Student (in English):** \_\_\_\_\_
- **Mother's Name:** \_\_\_\_\_
- **Father's Name:** \_\_\_\_\_ **Admission No :** \_\_\_\_\_
- **Guardian's Name:** \_\_\_\_\_
- **Nationality & Religion :** \_\_\_\_\_
- **Caste/Community :** \_\_\_\_\_
- **Admission Date :** \_\_\_\_\_
- **Gender :** \_\_\_\_\_

**Date of Birth (Figures & Words)** : \_\_\_\_\_

**Personal Identification Marks:**

\* 1) \_\_\_\_\_

\* 2) \_\_\_\_\_

**Standard at the time of leaving (Figures & Words)** : \_\_\_\_\_

**TC Apply Date:** \_\_\_\_\_ **TC Issued Date:** \_\_\_\_\_

**Scholarship or Educational Concession received** : \_\_\_\_\_

**Period of Study:** From \_\_\_\_\_ STD to \_\_\_\_\_ STD

**Reason For TC:** \_\_\_\_\_

**Next Joining School Name and Place :** \_\_\_\_\_

## DECLARATION BY THE PARENT / GUARDIAN

I hereby declare that the particulars recorded above against items are correct and that no change will be demanded by me in the future.

**Signature of the Student:** \_\_\_\_\_

**Signature of the Parent/Guardian:** \_\_\_\_\_

I certify that I have verified all the information provided and I hereby append my signature to confirm its accuracy.

**Signature of the Class Teacher:** \_\_\_\_\_