

NATIONAL TEACHERS COUNCIL SCHOOL REGISTRATION FORM - 2017

ENGLISH OLYMPIAD

$\overline{}$										
Post										
District										
Pin										
Mobile-2										
STD Code Land Line Mobile-1 Mobile-2										
ncipal Name										
Principal's Phone										
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Name										
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Signature of Teacher Incharge School Seal Signature of Principal										
FOR OFFICE USE ONLY										
1. Registration form received by Date										
2. School Registration Code: Receipt No.										



NATIONAL TEACHERS COUNCIL

MATHEMATICS OLYMPIAD

1. School Name													
2. School Affiliation Nur	nber									$ \longrightarrow $			
3. School Address										$ \longrightarrow $			
Pla	ace					Post (
City / To	wn	District											
St	ate	Pin											
4. School Phone	STD Cod	le	Land Lin	е	1	Mobile-1 Mobile-2							
5. School E-mail													
6. Principal Name													
Principal's Phon	e												
Principal's email													
7. Teacher Incharg	e	Name											
	Mobile Email ID												
8. Enrollment Deta	ils Class	3	4	5	6	7	8	9	10	Total			
	No. of Studer	ts											
	Amount												
9. Examination Fe	ee ₹ 125 per stud	lent.						_					
Total amount c	ollected (₹		Less 20	% (₹		Pa	yable Am	nount(₹					
10. Mode of payment: Demand Draft DD/Cheque Demand Draft DD/Cheque Online (NEFT / RTGS) DD Number Transaction ID Date Date													
Signature of Teacher Incharge School Seal Signature of Principal FOR OFFICE USE ONLY													
1. Registration form received by													
2. School Registration Code:													



NATIONAL TEACHERS COUNCIL SCHOOL REGISTRATION FORM - 2017

SCIENCE OLYMPIAD

1. 3	School Name													
2. \$	School Affiliation Number											$ \longrightarrow $		
3. 3	School Address											$ \longrightarrow $		
	Place	Post (
	City / Town	District												
	State	Pin												
4. \$	School Phone	STD Code Land Line						Mobile-1 Mobile-2						
5. 3	School E-mail													
6. I	Principal Name													
I	Principal's Phone													
I	Principal's email													
7	Teacher Incharge	Name												
	(Mobile Email ID													
8. Enrollment Details		Class	3	3 4 5		5 6		7	8	9	10	Total		
		No. of Students												
		Amount												
9.														
	Total amount collect	ed (₹		Less 20 (% (₹	₹		Pa	yable Arr	nount (₹				
10.	Mode of payment:													
	Demand Draft DD/C	heque				Or	nline (NE	FT/RTG	SS)					
	DD Number Transaction ID													
	Date				\int	Da	ate	$\left(\right)$				$ \longrightarrow $		
								C						
	Signature of Teacher Incharge School Seal Signature of Principal													
FOR OFFICE USE ONLY														
1.	1. Registration form received by													
2.	2. School Registration Code: Receipt No.													



NATIONAL TEACHERS COUNCIL SCHOOL REGISTRATION FORM - 2017

ALL INDIA TALENT SEARCH EXAMINATION (AITSE)

1. Scl	hool Name												
2. Sch	ool Affiliation Number	ation Number											
3. Scl	hool Address											$ \longrightarrow $	
	Place	Post (
	City / Town	District											
	State	Pin											
4. Scl	hool Phone	STD Code Land Line Mobile-1 Mobile-2											
5. Scl	hool E-mail												
6. Pri	ncipal Name												
Pri	cipal's Phone												
Pri	ncipal's email												
7. Tea	acher Incharge	Name											
	Mobile Email ID												
8. En	rollment Details	Class	3	4	5		6	7	8	9	10	Total	
		No. of Students											
		Amount											
	xamination Fee ₹												
Тс	otal amount collecte	ed (₹		Less 20	% (₹	=		Pa	yable Am	nount (₹			
10. M	ode of payment:												
D	emand Draft DD/C	heque				Onli	ne (NE	FT / RTG	S)				
D	D Number					Trar	nsactior	ו ID					
D	Date Date												
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Si	Signature of Teacher Incharge School Seal Signature of Principal												
FOR OFFICE USE ONLY													
1. R	1. Registration form received by												
2. S	chool Registration	Code:					Rece	eipt No.					