



**TAMILNADU TELECOM ACCOUNTS AND
FINANCE OFFICERS' WELFARE TRUST**

(Registered No: 54/2014)

Website: <https://www.tnafsoatrust.org>

Email: afsoatrust@gmail.com

AFFIX
YOUR
PHOTOGRAPH

Application form for seeking Educational Assistance to pursue Undergraduate / Masters course		
Name of the Student		
Gender		
Date of Birth		
Name of the College & address		
Course / year studying and duration of the course (Please attach latest marksheets)		
Mobile / WhatsApp No. / Email ID		
Have you ever received assistance from Trust before? If Yes, provide details	YES / NO	
Last date for paying fees	Amount:	Last date:
Residential Address		
Bank account details, if any		
Parents Name and occupation	Father	Mother
Monthly income of parents (Attach proof)		
Are your parents alive? If not, please attach death certificate of the deceased		
Declaration by the student		
I hereby declare that the above information is correct to the best of my knowledge. I understand that renewal of assistance every year depends on academic performance securing at least 60%.		
Signature of the Principal / HoD of College	Signature of Student	
Specific recommendations / justifications of the Trust Coordinator / Trustee:		

Note: Coordinator / Trustee should ascertain total expenses for education and whether any other financial assistance is being availed by the student.

23, Subramanya Swamy Koil Street, ARASU ILLAM, New Vandipalayam, Cuddalore 607004

P Santhakumar

Managing Trustee

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K Balasubramanian

Secretary

Mobile No.9444322157

R Guruprasad

Financial Secretary

Mobile 9486102406