



TAMIL UNIVERSITY, THANJAVUR
CULTURAL CENTRE OF TAMIL
AFFILIATION FORM

1. INSTITUTION /ORGANIZATION/SOCIETY

NAME AND ADDRESS :

2. COUNTRY / STATE :

3. NAME OF THE PLACE :

4. EXPERIENCE IN THIS FIELD (if any) :

5. CURRENT ACTIVITIES :

6. REGISTRATION WITH ANY OTHER GOVT.AGENCY/
AFFILIATION/ACCEPTANCE DETAILS :

7. TRAINING TOOLS AND INSTRUMENTS :

8. INSTRUCTOR'S DETAILS :

(attach separately)

9. MODE OF ADVERTISEMENT FOR ADMISSION
BY THE INSTITUTION/ORGANIZATION/SOCIETY
FOR ADMITTING STUDENTS :

10. SPECIFY THE AREA/LOCALITY OF OPERATION :

11. ANY OTHER DETAILS :

(NOTE -- incomplete application will be rejected)

Date :

Place:

Signature

(Office seal)

(To Be Completed Tamil Cultural Centre)

Item

Item

1.

7.

2.

8.

3.

9.

4.

10.

5.

11.

6.

CONCLUDING RECOMMENDATION :

Place :

Date :

Signature