

Enquiry / Enrolment for IIT-Foundation Correspondence Course _____

7th Std. 8th Std. 9th Std. 10th Std.



95-B, 2nd Floor, Siddamsetty Complex, Park Lane, Secunderabad - 500 003. Tel: 040-40088300/400

1. Name of the student
(Capital letters)

Please submit two passport size photographs at the time of enrolment

2. Parent / Guardian Details :

	Father / Guardian	Mother
Name		
Profession		
Designation		
Mobile No.		
e-mail address (Capital letters)		

3. Address for Correspondence (Capital letters)

4. Permanent Address

5. Date of Birth :

D	D	M	M	Y	Y

6. Sex:

M	F
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7. Reservation Category :

8. a. Name & Address of the School:

8. b. Examination Board:

- CBSE
- ICSE
- State Board _____
- Others (.....)

8. c. Previous Academic Year Performance Details

English	2 nd Language	Maths	Science	Social	Aggregate %

9. How did you come to know of T.I.M.E.'s IIT-Foundation Correspondence Course?

- Newspaper Advt Posters Pamphlet Scholarship Test T.I.M.E. Office Others (.....)

Date:

Signature of Parent

Signature of Student

To,
The Director, **T.I.M.E.** Secunderabad.
I thank you for enrolling me as a student for IIT-Foundation Class: _____ Correspondence Course.
I understand that in all the issues pertaining to the course, the decision of the director is final.
I understand that fees once paid will not be refunded under any circumstances.
I understand that the material provided to me by **T.I.M.E.** is for my personal use ONLY.
I will be providing **T.I.M.E.** with the details / copies of the admit cards. I am going to write in future of NTSE / Olympiad in which the test areas are similar to those in the above mentioned.
Since I am a bona fide student of **T.I.M.E.**, **T.I.M.E.** will be entitled to take credit for my success in NTSE that I am going to write in future as well as any entrance exam in which the test areas are similar to those in the above mentioned. I have no objection in **T.I.M.E.** publishing my photographs in newspapers & other promotional materials claiming the results.
By any other formalities required to be completed by me in case of my obtaining a reward.

Student's Name : _____ Signature: _____
(in full) _____ Date: _____

Name & Signature of the Parent/Guardian: _____

Address:.....
.....
.....
.....

Tel. No:.....STD Code:.....Mobile:.....

For Office purposes:
Total Course Fee:_____ Receipt No:_____ Mode of payment:_____
Fees Paid:_____ Date of payment:_____
DD / Cheque Number:_____ Drawn at:_____
Date:_____
Place:_____
Discount (If any) given on the basis of _____
Processed by:_____