



TAMIL SPEAKING UNION

Email: tamilspkunion@yahoo.co.uk; Tel: 465 6714

Courses in Spoken Tamil - 2017

Application Form

Course applied for:

(tick appropriate)

(1) Basic Level

(2) Lower Intermediate Level

(3) Upper Intermediate Level

(4) Advanced Level 1

(5) Advanced Level 2

Centre applied for:

Name and Address of Centre: _____

Day : _____

Time : _____

Surname of Applicant: _____

Other names: _____ Maiden Name: _____

Marital Status: _____ Age: _____ Sex: _____

Home Address: _____

Email: _____ Tel No. Res: _____ Mob: _____

Occupation: _____

Place of Work: _____

Name and Address of Guardian (if under 18): _____

Academic Qualifications:

CPE		SC OR GCE O LEVEL		HSC OR GCE A LEVEL	
Subject	Grades	Subject	Grades	Subject	Grades
				Principal Level	
				Subsidiary Level	

Other Qualifications:

I certify that the above information is correct

Date: _____ Signature of Applicant: _____

FOR OFFICE USE:

To be filled by Coordinator:

		Paid / Not Paid	Receipt No
Appl. /Reg. fee	Rs 300	_____	_____
Tuition fee	Rs 500	_____	_____
Certificate fee	Rs 200	_____	_____
Donation (if any)		_____	
Total:		_____	

Name of Coordinator / Authorized officer: _____ Signature: _____