



NATIONAL TEACHERS COUNCIL

NATIONAL LEVEL OLYMPIADS & AITSE 2024

Registration Form

1. School Name	<input type="text"/>		
2. School Affiliation Number	<input type="text"/>		
3. School Address	<input type="text"/>		
Place	<input type="text"/>	Post	<input type="text"/>
District	<input type="text"/>	City	<input type="text"/>
State	<input type="text"/>	Pincode	<input type="text"/>

4. School Contact Details

Land Phone	Mobile Number	E-mail
<input type="text"/>	<input type="text"/>	<input type="text"/>

5. Details of Principal

Name of Principal	Mobile Number	Email
<input type="text"/>	<input type="text"/>	<input type="text"/>

6. Detail of Coordinators:

Coordinators	Name	Phone Number	Email
Chief Coordinator	<input type="text"/>	<input type="text"/>	<input type="text"/>
NLMO Coordinator	<input type="text"/>	<input type="text"/>	<input type="text"/>
NLSO Coordinator	<input type="text"/>	<input type="text"/>	<input type="text"/>
AITSE Coordinator	<input type="text"/>	<input type="text"/>	<input type="text"/>

7.Enrollment Details

Olympiads	Classes	3	4	5	6	7	8	9	10	Total
NLMO	No.of Students									
NLSO	No.of Students									
AITSE	No.of Students									
		Grand Total								

8.Details of Examination Fee

a) Total Amount Collected (₹ 150xGrand Total)

₹

b) Less 20%(to be retained at school)

₹

c) Payable Amount [(a)-(b)]

₹

9. Mode of Payment

Demand Draft DD/Cheque

Online (NEFT/RTGS)

DD Number

Transaction ID

Date

Date

Signature of Teacher Incharge

School Seal

Signature of Principal

Demand Draft should be drawn in favour of NATIONAL TEACHERS COUNCIL payable at BENGALURU

OR

Deposit amount in our account

Account Name: NATIONAL TEACHERS COUNCIL

BANK: ICICI Quilandy,

IFSC: ICIC0001853

Account No: **185305000594**

For Office Use Only

Registration form recieved by

Date

School Registration No

Receipt No