

CHEVALIER T. THOMAS ELIZABETH COLLEGE FOR WOMEN

College Day Awards Application Form

(A Separate Application Form should be used for each award.)

Academic Year: 2025-2026

Award applying for: _____

Applicant Information

- Name: _____
- Register number: _____
- Department: _____
- Year of Study: _____
- Contact Number: _____
- Email: _____

- **Eligibility Criteria & Supporting Documents** (Attach necessary supporting documents as per the award criteria)
- **Personal Statement** (Maximum 250 words) Describe why you deserve this award and highlight your key achievements.
- **Declaration** I hereby declare that the information provided is accurate and that the supporting documents attached are authentic. I understand that providing false information may result in disqualification.

Date: _____

Signature: _____

Recommendation Requirement

The application must be supported by a recommendation letter from the Head of the Department (HOD) on the official letterhead.

Note:

- A Review Committee will scrutinise the applications based on the Award Criteria.
- The applicant must attach a complete CV

For Office Use Only

Application Received on: _____

Signature of Verification Office Admin: Mrs. R Anuradha: _____

Date: _____