

**TELANGANA CHRISTIAN (MINORITIES) FINANCE CORPORATION**  
(Minorities Welfare Department)  
**GOVERNMENT OF TELANGANA**

**NOMINATION FORM FOR FELICITATION OF INDIVIDUAL EMIENT CHRISTIAN**

*I/We nominate the following person who is a Bonafide Christian for felicitation:*

*His personal data and demonstrate of service is furnished below:*

*Passport Size  
Photograph of  
the Nominee*

<b>1.Name:</b>			
<b>2. Father's Name:</b>			
<b>3.Address:</b> H.No:/Street:			
Village:		Mandal:	
District:		PIN Code:	
Mobile No:			
Email ID:		Website:	
<b>4.DateofBirth:</b>			
<b>5.Religion:</b>			
<b>6.Nominationfor The Field of</b>	(Separate nomination form need to be used for each field &each Individual) a. Literature b. Education c. Medicine d. Social Service e. Music/Theatre/Fine Arts f. Sports		
<b>7. Necessary Documents to be enclosed</b>	a. For SC Converted Christians – Caste Certificate issued by Tahsildhar b. Others–Baptism Certificate c. Aadhar Card d. Pan card e. Document related to the service rendered in particular field.		

8.How in your opinion the aspirant/nominee demonstrated service worthy of recognition?  
(Documents to be enclosed)

9.How has the aspirant/nominee contribution impacted on a particular field, locality, group, community or humanity at large?  
(Documents to be enclosed)

10.Over what period of time has the Aspirant /Nominee made a major Contribution?  
(Documents to be enclosed)

11. Has the aspirant/ nominee's contribution been recognized else where with awards / felicitation (e.g.;in the media, awards, professional/ interest groups or through local government)

*(Documents to be enclosed.)*

## **12.Background of the Aspirant/ Nominee**

*Please provide full details of POSITION(S) HELD by the nominee, paid or voluntary, which support and are relevant to the nomination. Please give period of his/her activity, or whether the person is still involved in this area of activity.*

**13. Study Particulars:**

S. No.	Class		Year	Name of the Institute	Location		
	From	To			Village	Mandal	District
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							

#Please submit Photocopies of the relevant Bonafide Certificates.

In case of non-availability of the Bonafide Certificates, please submit a self-declaration affidavit in support of your above documents.

14.DETAILSOFPROPOSING AUTHORITY	
Name:	
Designation:	
Office:	
Address:	
Mobile/Tel/Fax No.:	
Email ID:	
Website:	
Correlation with nominee:	

### **DECLARATION OF PROPOSER**

I \_\_\_\_\_ S/o /D/o/W/o \_\_\_\_\_ residing at \_\_\_\_\_ hereby declare that, the information of the Aspirant / Nominee authenticated by me is correct to my knowledge, and any of the given information witnessed by me is found to be incorrect, I may be held responsible as per the LAW.

Date:

Signature of the Proposer

Station:

Name :

Mobile No:

### **DECLARATION OF ASPIRANT / NOMINEE**

I \_\_\_\_\_ S/o/D/o/W/o \_\_\_\_\_ residing at \_\_\_\_\_ . Hereby declare that, the information submitted / furnished by me is correct and I take full responsibility on the authenticity of the information and documents submitted by me.

If anything is found incorrect I may be held responsible as per LAW.

Date:

Signature of the Aspirant / Nominee

Station:

Name:

Mobile No:

***Note: Please send nomination by register post or in person to the o/o. District Minorities Welfare Officer at the concerned district from 23.11.2024 at 10:30 AM to 05.12.2024 before 5:00 PM duly writing on the cover, the Nomination for Felicitation in the field of***

**For more details, Please contact  
O/o. Managing Director  
TELANGANACHRISTIAN(MINORITIES)FINANCECORPORATION  
#GruhakalpaBuilding, 2<sup>nd</sup> Floor, MJ Road, Nampally, Hyderabad.  
Tel: 04023391067, Email: [tscmf@gmail.com](mailto:tscmf@gmail.com), Website: [www.tgcmfc.in](http://www.tgcmfc.in)**

**Managing Director  
TGCMFC**

