

Bank Detail Form

TO BE FILLED BY THE MOTIVATOR

Motivator's Name (Principal/ SNAI Advisor/ Faculty)_____

TNAI No._____ Mob. No _____ Academic Year-----

School/ College of Nursing Address_____

SNAI Unit Code: _____ E-mail:_____

The Incentive for motivator will be transferred (NEFT) to the Motivator bank account directly from TNAI HQs.
Hence, it is mandatory to fill the bank details and send to TNAI for releasing the Incentive amount.

Name of the Account Holder: _____
(Should be in the name of Motivator)

Nature of account _____

Name of Bank & Branch _____

Bank Account Number																			
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IFSC CODE																			
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PAN NUMBER																			
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Note: please enclose the following along with this form

- a) Cancelled Cheque
- b) Copy of pan card

Signature of Motivator