

**INDIAN INSTITUTE OF TECHNOLOGY KANPUR
CAMPUS SCHOOL**

**DONATION FORM
(Submit this form to Institute Nominee, Campus School)**

Name _____ Designation _____

PF. No. _____ Department/Section _____ Ph.# _____

DECLARATION

I am willing to make donation to Campus School, IIT Kanpur. The amount will be deducted from my salary for the following purpose mentioned below (tick):

Campus School Welfare Fund

Date: _____

Signature of the IITK Employee

To,
The Officer In-Charge
Finance & Accounts Section
IIT Kanpur

I agree for deduction of Rs. _____ in words (.....)
per month from my salary towards donation for Campus School, IIT Kanpur
towards..... from the month of _____ 20
_____ to the month _____ 20 .

Name _____ Designation _____

PF No. _____ Department/Section _____ Ph.# _____

Date: _____

Signature of the IITK Employee

Forwarded by,

(Institute Nominee, Campus School)