

SCHOLAR'S PERFORMANCE REPORT FOR THE YEAR			
All information requested on this form should be complete			
Name of Scholar:		Grant Ref. No:	
Date of Birth:		Male/Female	
Current Address:			
City:	District:	Province:	
How Long Living in this Address			
SCHOOL INFORMATION			
Name of Current school:			
School address:			
Class / Standard / Grade in 2009:			
City:	Phone:	Fax:	
Date of Last Year-end Test:			
SUBJECT MARKS FOR THE YEAR			
(Marks should be entered as percentages for all the three terms)			
SUBJECT	TERM 1 (%)	TERM 2 (%)	TERM 3 (%)
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
REPORT ON EXTRA CURRICULAR ACTIVITIES (IF ANY)			
REPORT ON SPECIAL INTERESTS, TALENTS AND INTERESTS EXHIBITED BY STUDENT (IF ANY)			

PARTICIPATION ON VOLUNTEERISM AND TEAMWORK PERFORMANCE (IF ANY)	
CERTIFICATION	
Signature of Class Teacher:	Date:
Name:	
Signature of Principal:	Date:
Name:	
OFFICIAL USE BY THE TMV SOCIETY – POST TSUNAMI EDUCATIONAL ASSISTANCE PROGRAMME	
Documents in order and verified	YES: _____ NO: _____
Approved:	YES _____ NO: _____

Please place below, the Official Frank of School